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12/22/2016

Division of Corporations

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BARTOM USA CORP

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: BARTOM USA CORP

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7884 NW 46 ST

9445 SW 224 TERRACE

DORAL, FL 33166

MIAMI, FL 33190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

Name and Title: Martin Cristian Konoval (P)

Name and Title: Alain Moreno (T)

Address: 7884 NW 46 ST
DORAL, FL 33166

Address: 7884 NW 46 ST
DORAL, FL 33166

Name and Title: Oscar Javier Barela (V/P)

Name and Title: _____

Address: 7884 NW 46 ST
DORAL, FL 33166

Address: _____

Name and Title: Juan Jose Tomaselo (D)

Name and Title: _____

Address: 7884 NW 46 ST
DORAL, FL 33166

Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Oscar Javier Barela
Address: 7884 NW 46 ST
DORAL, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Oscar Javier Barela
Address: 7884 NW 46 ST
DORAL, FL 33166

ARTICLE VIII EFFECTIVE DATE: 01/01/2017

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent 12/21/2016
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator 12/21/2016
Date