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COVER LETTER

Division of Corporations			
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me of Alien Business Organization)			
Agent and Registered Office for Alien Business Organi	ization ar	nd fee	(s)
ning this matter to the following:			
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matter, please call:	OF STAIL	PH 12: 07	
at (305) 358-8005	, A.		
(Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
amount:			
\$43.75 Filing Fee & Certified Copy	1		
	matter, please call: at (305) 358-8005 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Agent and Registered Office for Alien Business Organization aroning this matter to the following: It is at (305) 358-8005 (Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the following: Agent and Registered Office for Alien Business Organization and feeding this matter to the feeding this matter to the feeding this matter to the feeding this

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

[Kogal Trading S.A.					
	(Name of alien business of	organization)			
2. Panama	3. None				
	der which entity is organized)	. (FEI Number, if applicable)			
. F2rd ⊏ Street Unrher	sizacion Marballa, MMC Towar, 16th	Cloor Banama			
4. Silver, Ollibar	nizacion Marbella, MMG Tower, 16th (Principal office ad	idress)			
c Name - A Mandal Gan-	-				
5. Name and Florida Stre	et address of registered agent.				
	Steven M. Charchat, P.A.				
	848 Brickell Avenue, Suite 1040				
	Miami, Florida 33131	_			
are identical. 7. Colombia	TENZ				
	(Signature of Charman, 100 of	idential, or other)		22	
Miami, Florida 33131 The street address of the registered office and the street address of the business office of the registered agent are identical. (Signature of chairman, vice chairman, or officer) Carmen Saenz Pizano, attorney-in-fact (Name and capacity of person signing in number 7 above) Signature of registered agent:		=======================================	QDE:		
	(Name and capacity of person signi	ing in number 7 above)	The state of the s	KA.	
9. Signature of registered	i agent:		RSS A	7-5	
I hereby accept the app	ointment as registered agent. I am	familiar with and accept the	obliga tions	o ∏ ee	ction
			10.7 11.5°	2	Name of
			<u></u>	0.7	***
11	-(M	4/16	114		
(Registered agent a	accepting appointment)	(Date			

THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILING FEE \$35

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314