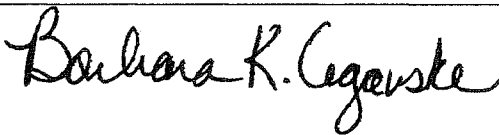


Secretary of State

State of Nevada



Apostille (Convention de La Haye du 5 octobre 1961)			
1. Country Pays / País:		United States of America	
This public document Le présent acte public / El presente documento público			
2. has been signed by a été signé par ha sido firmado por		BARBARA K. CEGAVSKE	
3. acting in the capacity of agissant en qualité de quien actúa en calidad de		NEVADA SECRETARY OF STATE	
4. bears the seal/stamp of est revêtu du sceau / timbre de y está revestido del sello / timbre de		STATE OF NEVADA	
CERTIFIED Attesté / Certificado			
5. at à / en		Carson City, Nevada, U.S.A.	
6. the le / el día		FOURTEENTH DAY OF JANUARY, 2016	
7. by par / por		Barbara K. Cegavske, Secretary of State, State of Nevada, U.S.A.	
8. Number sous no bajo el número		2016/039/RA	
9. Seal/Stamp: Sceau / timbre : Sello / timbre :			10. Signature: Signature : Firma :  Barbara K. Cegavske Secretary of State

This Apostille only certifies the authenticity of the signature and the capacity of the person who has signed the public document, and, where appropriate, the identity of the seal or stamp which the public document bears.

This Apostille does not certify the content of the document for which it was issued.

This Apostille is not valid for use anywhere within United States of America, its territories or possessions.

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Cette Apostille ne certifie pas le contenu de l'acte pour lequel elle a été émise.

L'utilisation de cette Apostille n'est pas valable en / au Etats-Unis d'Amérique, ses territoires ou possessions.

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STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State



JEFFERY LANDERFELT
*Deputy Secretary
for Commercial Recordings*



OFFICE OF THE
SECRETARY OF STATE

Certified Copy

January 14, 2016

Job Number: C20160113-2007
Reference Number: 00010183532-13
Expedite:
Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s)	Description	Number of Pages
20150574455-78	Annual List	1 Pages/1 Copies



Respectfully,

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certified By: Raphael Alves
Certificate Number: C20160113-2007
You may verify this certificate
online at <http://www.nvsos.gov/>

Commercial Recording Division
202 N. Carson Street
Carson City, Nevada 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

**INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE
BUSINESS LICENSE APPLICATION OF:**

TELUR MARKETING LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0636292010-7

FOR THE FILING PERIOD OF 2015 TO 2016

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov****

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 694-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ABOVE SPACE IS FOR OFFICE USE ONLY

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NRS 76.020 Exemption Codes

- 001 - Governmental Entity
- 005 - Motion Picture Company
- 006 - NRS 680B.020 Insurance Co.

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NAME JOSÉ ANUAR MILLÁN ABADÍA	MANAGER OR MANAGING MEMBER		
ADDRESS Km 6 ½ Vía Duran-Tambo Duran	CITY Guayas, Ecuador	STATE	ZIP CODE 00000000000000
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X
Signature of Manager, Managing Member or
Other Authorized Signature

Title: MANAGER Date: 12/28/2015

Nevada Secretary of State List ManagMem
Revised: 7-1-15