

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>INFORME DE I.N.D</b>             |                                                | <b>Nº 13.401</b><br>HOJA 1 de 1                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------|----------------------------|--------------------|-------------------------------------|-------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------|-------------------------------------|-------------------------------------|--------------------|-------------------------------------|--------------------------|-----------|-------------------------------------|----------|--------------------------|------------------|--------|-----------|-----------|-----------|-----------------|-----------|-------|----------|----------|---------------------|---------|-------|----------|----------|----------------|------------|-----------------|-----------|-----------|-------------|-----|-------|----------|----------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>GRILLETE OMEGA</b>               |                                                |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| PROCEDIMIENTO: <b>PO 01</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CLIENTE: <b>TRANSPORTE JMB</b>      |                                                | FECHA:                                                                              | 27 / 02 / 2023                      |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| PRÁCTICA DEL CLIENTE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | EQUIPO: 63                          | LUGAR DE INSPECCIÓN: <b>BASE GM END S.R.L.</b> |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| MARCA: <b>CROSBY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DIAMETRO: <b>3/4"</b>               | CAPACIDAD:                                     | <b>4 TONELADAS</b>                                                                  |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Nº PARTE: <b>2616</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | IDENT Nº: <b>63</b>                 | VIGENCIA:                                      | <b>12 MESES</b>                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Inspección a metal limpio:</td> <td style="width: 20%;">Arenado</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 30%;">Limpieza Mecánica</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Condiciones de Inspección:</td> <td>Desarmado</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Armado</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Inspección con partículas:</td> <td>Secas</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Humedas</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Condiciones de Entrega:</td> <td>Desarmado</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Armado</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>                                                      |                                     |                                                |                                                                                     |                                     | Inspección a metal limpio: | Arenado            | <input checked="" type="checkbox"/> | Limpieza Mecánica                                                                   | <input type="checkbox"/> | Condiciones de Inspección:          | Desarmado                | <input type="checkbox"/> | Armado                              | <input checked="" type="checkbox"/> | Inspección con partículas: | Secas                               | <input checked="" type="checkbox"/> | Humedas            | <input type="checkbox"/>            | Condiciones de Entrega:  | Desarmado | <input checked="" type="checkbox"/> | Armado   | <input type="checkbox"/> |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Inspección a metal limpio:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Arenado                             | <input checked="" type="checkbox"/>            | Limpieza Mecánica                                                                   | <input type="checkbox"/>            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Condiciones de Inspección:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Desarmado                           | <input type="checkbox"/>                       | Armado                                                                              | <input checked="" type="checkbox"/> |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Inspección con partículas:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Secas                               | <input checked="" type="checkbox"/>            | Humedas                                                                             | <input type="checkbox"/>            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Condiciones de Entrega:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Desarmado                           | <input checked="" type="checkbox"/>            | Armado                                                                              | <input type="checkbox"/>            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <th>EQUIPO UTILIZADO</th> <th>Nº DE SERIE / LOTE</th> <th>Nº DE CERTIFICADO</th> <th>F. CALIBRACIÓN</th> <th>F. DE VENCIMIENTO</th> </tr> <tr> <td>LÁMPARA UV</td> <td>9078</td> <td>END 224-10</td> <td>30/8/2010</td> <td>VER INT. UV</td> </tr> <tr> <td>YUGO</td> <td>0586</td> <td>5864</td> <td>8/9/2022</td> <td>8/9/2023</td> </tr> <tr> <td>BOBINA AC-DC</td> <td>17052908</td> <td>06299</td> <td>8/5/2020</td> <td>8/5/2025</td> </tr> <tr> <td>MEDIDOR DE CAMPO</td> <td>GM 064</td> <td>NO APLICA</td> <td>NO APLICA</td> <td>NO APLICA</td> </tr> <tr> <td>MED. INT. LUZ V</td> <td>070801317</td> <td>06301</td> <td>8/9/2023</td> <td>8/9/2023</td> </tr> <tr> <td>MEDIDOR INT. LUZ UV</td> <td>AC49723</td> <td>06302</td> <td>8/9/2022</td> <td>8/9/2023</td> </tr> <tr> <td>PARTICULAS S/H</td> <td>1701005785</td> <td>049552000190002</td> <td>8/9/2021.</td> <td>8/9/2022.</td> </tr> <tr> <td>MASA PATRON</td> <td>864</td> <td>06303</td> <td>8/5/2020</td> <td>8/5/2025</td> </tr> </table> |                                     |                                                |                                                                                     |                                     | EQUIPO UTILIZADO           | Nº DE SERIE / LOTE | Nº DE CERTIFICADO                   | F. CALIBRACIÓN                                                                      | F. DE VENCIMIENTO        | LÁMPARA UV                          | 9078                     | END 224-10               | 30/8/2010                           | VER INT. UV                         | YUGO                       | 0586                                | 5864                                | 8/9/2022           | 8/9/2023                            | BOBINA AC-DC             | 17052908  | 06299                               | 8/5/2020 | 8/5/2025                 | MEDIDOR DE CAMPO | GM 064 | NO APLICA | NO APLICA | NO APLICA | MED. INT. LUZ V | 070801317 | 06301 | 8/9/2023 | 8/9/2023 | MEDIDOR INT. LUZ UV | AC49723 | 06302 | 8/9/2022 | 8/9/2023 | PARTICULAS S/H | 1701005785 | 049552000190002 | 8/9/2021. | 8/9/2022. | MASA PATRON | 864 | 06303 | 8/5/2020 | 8/5/2025 |
| EQUIPO UTILIZADO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Nº DE SERIE / LOTE                  | Nº DE CERTIFICADO                              | F. CALIBRACIÓN                                                                      | F. DE VENCIMIENTO                   |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| LÁMPARA UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 9078                                | END 224-10                                     | 30/8/2010                                                                           | VER INT. UV                         |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| YUGO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 0586                                | 5864                                           | 8/9/2022                                                                            | 8/9/2023                            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| BOBINA AC-DC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 17052908                            | 06299                                          | 8/5/2020                                                                            | 8/5/2025                            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| MEDIDOR DE CAMPO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | GM 064                              | NO APLICA                                      | NO APLICA                                                                           | NO APLICA                           |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| MED. INT. LUZ V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 070801317                           | 06301                                          | 8/9/2023                                                                            | 8/9/2023                            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| MEDIDOR INT. LUZ UV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | AC49723                             | 06302                                          | 8/9/2022                                                                            | 8/9/2023                            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| PARTICULAS S/H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1701005785                          | 049552000190002                                | 8/9/2021.                                                                           | 8/9/2022.                           |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| MASA PATRON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 864                                 | 06303                                          | 8/5/2020                                                                            | 8/5/2025                            |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| <b>DETALLE DE INSPECCIÓN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                                |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | APTO                                | NO APTO                                        |  |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Detección de Fisuras                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>                       |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Condición de Ojal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>                       |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Condición de Cuerpo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>                       |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Condición de Perno                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>                       |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| Aprobación según procedimiento Nº PO 01 ASTM E709                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                                | SI                                                                                  |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| <b>DETALLE DE TAREAS REALIZADAS - OBSERVACIONES - COMENTARIOS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                                |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <br/>           GM END S.R.L.<br/>           MANSILLA HUGO GASTON<br/>           Op. NIVUS. PM. LP         </div> <div style="width: 30%;"></div> <div style="width: 30%;">           PRECINTO Nº<br/>           FECHA PUESTA EN VIGENCIA         </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                                                |                                                                                     |                                     |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |
| FIRMA OPERADOR GM END S.R.L.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     | FIRMA CLIENTE - ACLARACIÓN                     |                                                                                     | FIRMA - ACLARACIÓN                  |                            |                    |                                     |                                                                                     |                          |                                     |                          |                          |                                     |                                     |                            |                                     |                                     |                    |                                     |                          |           |                                     |          |                          |                  |        |           |           |           |                 |           |       |          |          |                     |         |       |          |          |                |            |                 |           |           |             |     |       |          |          |

TIRSO LOPEZ Nº 636 - Bo INDUSTRIAL - COM. RIV. - CHUBUT - 9000 - CEL: (0297) 15-6256447 - EMAIL: mansilla.end@gmail.com