

19/7/22, 11:40

Division of Corporations

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Florida Department of State

Division of Corporations

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LUPA ENTERPRISES INC
Account Number : I20200000050
Phone : (727)298-8007
Fax Number : (727)914-5090

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: info@usacorporationservices.com

FLORIDA LIMITED LIABILITY CO.
IBBT LLC

Table with 2 columns: Item and Value. Rows include Certificate of Status (0), Certified Copy (0), Page Count (05), and Estimated Charge (\$125.00).

2022 JUL 19 PM 2:28

FLORIDA DEPARTMENT OF STATE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

22 JUL 19 PM 12:35

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Electronic Filing Menu

Corporate Filing Menu

Help

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

IBBT LLC

Article II

The street address of principal office of the Limited Liability Company is:

**600 Cleveland Street, Suite 294, Office 462
Clearwater, Florida 33755
United States of America**

The mailing address of the Limited Liability Company is:

**600 Cleveland Street, Suite 294, Office 462
Clearwater, Florida 33755
United States of America**

Article III

Other provisions, if any:

Any and all lawful business

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TALLAHASSEE, FLORIDA

Article IV

The name and Florida street address of the registered agent is:

**Lupa Enterprises INC
100 SE 2nd Street Suite 2000
Miami, Florida 33131
United State of America**



Registered Agent's Signature

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

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TALLAHASSEE, FLORIDA

Article V

The name and address of each person(s) authorized to manage and control the Limited Liability Company:

Title: MGR

Hugo Hector Williams

Address

Bogota 869 P B Dto E
Ciudad Autonoma de Buenos Aires
Buenos Aires
Argentina
1405

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TALLAHASSEE, FLORIDA

Article VI

The effective date for this Limited Liability Company shall be:

07-19-2022

Hugo Hector Williams

Signature of a member or an authorized representative of
a member.

Hugo Hector Williams

Name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

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