

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000316301

Entity Name: SHOPYLIBRE LLC**Current Principal Place of Business:**600 CLEVELAND ST STE 393 OFFICE 416
CLEARWATER, FL 33755**Current Mailing Address:**600 CLEVELAND ST STE 393 OFFICE 416
CLEARWATER, FL 33755**FEI Number:** 32-0660438**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LUPA ENTERPRISES INC
600 CLEVELAND ST STE 393 OFFICE 416
CLEARWATER, FL 33755 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	VAN BEEK, LEONARDO
Address	CAMINO DEL SOL 3895-7
City-State-Zip:	SANTIAGO REGION METROPOLITANA 7700806

Title	MGR
Name	GASALY COHN, PATRICIO MATIAS
Address	AV LAS CONDES 10527
City-State-Zip:	SANTIAGO REGION METROPOLITANA 7591468

Title	MGR
Name	DAZA CHANCONE, EDUARDO MIGUEL
Address	AV MANQUEHUE NORTE 966 DEPARTAMENTO 201
City-State-Zip:	SANTIAGO REGION METROPOLITANA 7550000

Title	MGR
Name	MIRANDA MIRANDA, DAKOTA ALEXANDRA
Address	AV MANQUEHUE NORTE 966 DEPARTAMENTO 210
City-State-Zip:	SANTIAGO REGION METROPOLITANA 7550000

Title	MGR
Name	KASSEN CHUECOS, FAUADZ JOSEF
Address	AV MANQUEHUE NORTE 966 DEPARTAMENTO 305
City-State-Zip:	SANTIAGO REGION METROPOLITANA 7550000

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VAN BEEK, LEONARDO

MGR

02/18/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date