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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000000 Phone : (727)568-0307 Fax Number : (727)298-8007

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

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#### FLORIDA LIMITED LIABILITY CO. OIP IMPORT & EXPORT LLC

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# Articles Of Organization For Florida Limited Liability Company

#### <u>Article I</u>

The name of the Limited Liability Company is:

## OIP IMPORT & EXPORT

#### Article II

The street address of principal office of the Limited Liability

Company is:

600 Cleveland Street Suite 393, Office 125 Clearwater, Florida 33755 United State of Amercia

The mailing address of the Limited Liability Company is:

600 Cleveland Street Suite 393, Office 123 Clearwater, Florida 33755 United State of Amercia

#### Article III

Other provisions, if any:

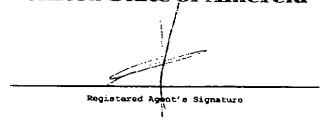
Any and all lawful business

#### Article IV

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

### Lupa Enterprises INC

600 Cleveland Street Suite 393 Clearwater, Florida 33755 United State of Amercia



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..

#### <u>Article v</u>

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

Title: MGR AVILA CRUZ OSWALDO Jr Pachacutec 1527 Jesús Maria Lima - Perú - Zip Code 15072

#### Article VI

The effective date for this Limited Liability Company shall be:

07/30/2020

2020 JUL 30 PM 12: 22

820

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

#### AVILA CRUZ OSWALDO

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.