

11/25/2020

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC
Account Number : I20200000050
Phone : (727)560-0307
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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TECHSTORE ENTERPISES LLC

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2020 NOV 30 AM 9:36

Electronic Filing Menu

Corporate Filing Menu

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TECHSTORE ENTERPRISES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/03/2020 and assigned
Florida document number 120000223391

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

City

_____, Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MIGUEL E. CASTILLO MENA	DE LAS VIÑAS E13-456 y LOS TRIGALES	☒ Add
		QUITO - ECUADOR - CP: 170514	☐ Remove
			☐ Change
AMBR	Rita Lucia Báez Estrella	Carlos Mantilla Oe6-01 y Sevilla, Portal San José 2,	☒ Add
		QUITO - ECUADOR - CP: 170204	☐ Remove
			☐ Change
AMBR	Alan Ivan Uriarte Castellano	5975 Loma Vista Av Huntington Park	☒ Add
		California - ZIP COD: 90255 USA	☐ Remove
			☐ Change
MGR	Evelio Dario Gutierrez Garay	JR 24 Número 102, Departamento 301	☐ Add
		Distrito San Borja, Departamento Lima	☒ Remove
		Provincia Lima, Perú	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

NOVEMBER 25 2020

Typed or printed name of signer

Filing Fee: \$25.00