

# L21000051018

8/2/2021

División de Corporaciones

Departamento de Estado de Florida  
División de Corporaciones  
Hoja de presentación de presentación electrónica

**Nota: imprima esta página y utilícela como portada.** Escriba el número de auditoría de fax (que se muestra a continuación) en la parte superior e inferior de todas las páginas del documento.

((H21000053123 3))



H210000531233ABCR

**Nota:** NO presione el botón ACTUALIZAR / RECARGAR en su navegador desde esta página. Hacerlo generará otra portada.

A:  
División de Corporaciones  
Número de fax: (850)617-6381

De:  
Nombre de cuenta: LUPA ENTERPRISES INC  
Número de cuenta: I20200000050  
Teléfono: (727)560-0307  
Número de fax: (727)914-5090

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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\*\* Ingrese la dirección de correo electrónico de esta entidad comercial que se usará en el futuro envíos de informes anuales. Ingrese solo una dirección de correo electrónico, por favor. \*\*

Dirección de correo electrónico: INFO@USACORPORATIONSERVICES.COM

**FLORIDA LIMITED LIABILITY CO.**

**Vargas & Cia LLC**

Certificado de estado	0
Copia certificada	0
Recuento de páginas	04
Cargo estimado	125.00 \$

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Menú de archivo electrónico

Menú de archivo corporativo

Ayuda

**Articles Of Organization For  
Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:

**Vargas & Cia LLC**

**Article II**

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

**600 Cleveland Street  
Suite 393, Office 215  
Clearwater, Florida 33755  
United State of America**

The mailing address of the Limited Liability Company is:

**600 Cleveland Street  
suite 393, Office 215  
Clearwater, Florida 33755  
United State of America**

**Article III**

Other provisions, if any:

**Any and all lawful business**

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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 America**



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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..

Article V

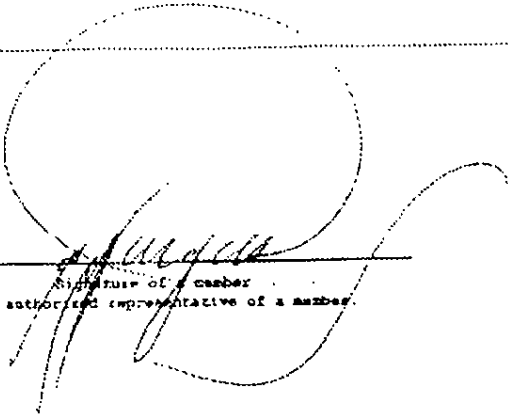
The name and address of each person(s) authorized to manage and control the Limited Liability Company:

**Title: MGR**  
**Guillermo Rafael Vargas Diaz**  
**Address:**  
**Residencial Ciudad Jardín, Semáforos**  
**Tenderi 1/2c al oeste Casa # 832 mano**  
**izquierda.**  
**Managua, Managua, NICARAGUA.**

**Article VI**

The effective date for this Limited Liability Company shall be:

**02/03/2021**

.....  
  
.....

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

**Guillermo Rafael Vargas Diaz**

\_\_\_\_\_  
Name of signor

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TALLAHASSEE, FLORIDA

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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.