Division of Corporations **Electronic Filing Cover Sheet**

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From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050 : (727)298-8007 Phone 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

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` 6/27/2022

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 2022 JUN 24 AM II: 55 OF

AESS. USA. LLC

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

(A Florida Limited Liability Company)

(A Flonda Linned	Claotity Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000096787</u>	were filed on 03/05/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility 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: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Cha	nging 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>	Name	Address	Type of Action
MGR	Ana Maria Bernudez Juliett	5254 Mirror Lakes Blvd, Boynton Beach, FL 3372	DAdd
			Remove
			□Change
MGR Oscar Velasco Vuelta	Oscar Velasco Vuelta	1600 Ponce de Leon Blvd Suite 1047	
	Coral Gables FL 33134	□Remove	
		Change	
		🗆 Add	
		□Remove	
		Change	
		□Add	
		□Remove	
		□ Change	
		□ Add	
			□Remove
		□ Change	
		CJAdd	
			□Remove
			Change

D. If amending any other inform	ation, enter change(s) here: (Attach additional sheets, if necessary.)
· · · · · · · · · · · · · · · · · · ·	
	
	······································
E. Effective date, if other than th	te date of filing:(optional) sust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
Note: If the date inserted in this b	block does not meet the applicable statutory filing requirements, this date will not be listed as 1. Department of State's records.
If the record specifies a delayed effecti record is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	. 2022
	Ana Maria Bermudez Signature of a member or authorized reprosentative of a member
	Ana Maria Bermudez Juliett
	Typed or printed name of signee

From Lupa Enterprices Inc 1.727.914.5090 Fri Jun 24 14:42:23 2022 UTC Page 4 of 4

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