

## Departamento de Estado de Florida

**L2100156244**

**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.

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**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)298-8007  
Número de fax: (727)914-5090

**\*\* Ingrese la dirección de correo electrónico de esta entidad comercial que se utilizará 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.  
SOUTHLINE SERVICES LLC**

|                       |           |
|-----------------------|-----------|
| Certificado de estado | 0         |
| Copia certificada     | 0         |
| Recuento de páginas   | 04        |
| Cargo estimado        | 125,00 \$ |

Menú de archivo electrónico

Menú de archivo corporativo

Ayudar

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

## **Article I**

The name of the Limited Liability Company is:

**SOUTHLINE SERVICES LLC**

## **Article II**

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

**600 Cleveland Street  
Suite 393, Office 279  
Clearwater, Florida 33755  
United State of America**

The mailing address of the Limited Liability Company is:

**600 Cleveland Street  
Suite 393, Office 279  
Clearwater, Florida 33755  
United State of America**

## **Article III**

Other provisions, if any:

**Any and all lawful business**

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CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

## **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..

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CLERK OF COURT  
CLERK OF COURT

## **Article V**

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

**Title: MGR**

JUAN DOMINGO SALOMON

**Address**

ALVAREZ CONDARCO 1255 BIS  
ROSARIO  
SANTA FE  
ARGENTINA  
2000

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CLERK

## **Article VI**

The effective date for this Limited Liability Company shall be:

**2021-04-12**

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*JUAN DOMINGO SALOMON*

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

**JUAN DOMINGO SALOMON**

\_\_\_\_\_  
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.

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TAMPA