L 21000 194761

......

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001798913)))



H210001798913ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Co	rporations	
	Fax Number	: (850)617-6381	2021
From:		1	
	Account Name	: LUPA ENTERPRISES INC	\sim
	Account Number	: 120200000050	
	Phone	: (727)298-8007	. <u>.</u>
	Fax Number	: (727)914-5090	
Enter	the email addres	s for this business entity to be used for future	
an	nual report mail:	ings. Enter only one email address please.** 🦷 👘	5
	an address inf	o@usacorporationservices.com	æ

FLORIDA LIMITED LIABILITY CO. YAMITA USA LLC				
Certificate of Status	0			
Certified Copy	0			
Page Count	04			
Estimated Charge	\$125.00			

2021 KAY -4 PH 4: 29

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

YAMITA USA LLC

Article II

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

600 Cleveland Street Suite 393, Office 320 Clearwater, Florida 33755 United State of America

The mailing address of the Limited Liability Company is:

2021 M.Y - 4

ឹង

600 Cleveland Street Suite 393, Office 320 Clearwater, Florida 33755 United State of America

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 America

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

. ,

Yamil Gabriel Gane **Address** juan torres de vera y Aragón 1378 corrientes Corrientes Argentina 3400

Title: MGR

Tadeo Francisco Gane **Address** Av. juan de vera 1378 corrientes Corrientes Argentina 3400

Article VI

. .

.

The effective date for this Limited Liability Company shall be:

<u>05-04-2021</u>

Yamil Gabriel Gane

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

Yamil Gabriel Gane

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.