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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LUPA ENTERPRISES INC
Account Number : I20200000050
Phone : (727)298-8007
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

**FLORIDA LIMITED LIABILITY CO.
VYM ENTERPISES LLC**

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Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

VYM ENTERPRISES LLC

Article II

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

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

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The mailing address of the Limited Liability Company is:

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

Article III

Other provisions, if any:

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

Article V

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

Title: MGR

Victor Alejandro Lugo Rico

Address

Av. Santa Rosa 634. Departamento 703
Santiago
Región Metropolitana
Chile
8330566

Title: MGR

Melissa Coromoto Pinto Montes de Oca

Address

Av. Santa Rosa 634. Departamento 703
Santiago
Región Metropolitana
Chile
8330566

Article VI

The effective date for this Limited Liability Company shall be:

06-28-2021

Victor Alejandro Lugo Rico

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

Victor Alejandro Lugo Rico

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.