# L21000335417

#### 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.

(((H21000280883 3)))



H210002808833ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

Distriction (1) -

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. VESSEL LOGISTICS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

## Articles Of Organization For Florida Limited Liability Company

#### Article I

The name of the Limited Liability Company is:

VESSEL LOGISTICS LLC

#### Article II

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

600 Cleveland Street Suite 393, Office 427 Clearwater, Florida 33755 United State of America

The mailing address of the Limited Liability Company is:

600 Cleveland Street Suite 393, Office 427 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

MIRTA CORINA RODRIGUEZ RUBATTO

Address

Jr. Juan Manuel del mar y Bermedo 1364 A-24 Chacra Rios Sur Lima

Lima lima PERU 15083

Title: MGR

MATIAS RODRIGO QUINTANILLA DE LA FLOR

Address

Alejandro Deústua 359 La Aurora, Miraflores

LIMA LIMA

PERU

15048

### **Article VI**

The effective date for this Limited Liability Company shall be:

#### 07-20-2021

UNa Caina Bliggez Botto

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

#### **MIRTA CORINA RODRIGUEZ RUBATTO**

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.