9/7/23, 5:23 PM

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050

Phone : (727)298-8007 Fax Number : (305)397-0980

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: filings@usacorporationservices.com

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T. LETTEUX

SEP 1 3 2023

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Fax: (850) 617-6381

LUXURY Q		
(<u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) 1 Liability Company)	
The Articles of Organization for this Limited Liability Compar	y were filed on 10/07/2021	and assigned
florida document number <u>L21000440469</u>		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	pility Company," the designation "LLC" or the	e 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:		
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
		<u></u>
		;
If amending the registered agent and/or registered office	address on our records, <u>enter the p</u>	ame of the new registe
gent and/or the new registered office address here:		A
Name of New Registered Agent:		். ு ்
		
Name of New Registered Agent: New Registered Office Address:	Francis Plant to account the	· •
	Enter Florida sweet address	· •
	Enter Florida sirvei address . Florida	9: <u>5</u>

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

From Luis Grylo

Fax: 18885334730

To:

Fax: (850) 617-6381

Page: 4 of 5

11/9/2023 10:46

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>	<u>Name</u>	Address	Type of Action
MGR	RICARDO DIEGO, CABRAL	7084 NW 50th st MIAMI, FL, 33166, USA	□∧dd
			□Remove
			X Change
			□Add
		~·····································	□Remove
			□Change
			🗆 Add
			□Remove
			🗆 Add
			🗀 Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

D. If amending any other in	information, enter change(s) here: (Attach additional sheets, if necessary	IJ.
		
~		
		
		
		
* ************************************	· · · · · · · · · · · · · · · · · · ·	
		
		
(If an effective date is listed, the <u>Note:</u> If the date inserted in	han the date of filing:	
the record specifies a delayed cord is filed.	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	: 90th day after the
Dated Sep 06		
	Signature of a member of authorized representative of a member	
	Signature of a member or authorized representative of a member	
	Diego Cabral	
	Typed or printed name of signee	