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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LUPA ENTERPRISES INC

Account Number : 120200000050 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.\*\*

info@usacorporationservices.com Email Address:

#### FLORIDA LIMITED LIABILITY CO. INVERSIONES MUNDIALES EN EUROS LLC

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# Articles Of Organization For Florida Limited Liability Company

#### Article I

The name of the Limited Liability Company is:

INVERSIONES MUNDIALES EN EUROS LLC

### Article II

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

600 Cleveland Street Suite 393, Office 584 Clearwater, Florida 33755 United State of America

The mailing address of the Limited Liability Company is:

600 Cleveland Street Suite 393, Office 584 Clearwater, Florida 33755 United State of America

#### Article III

Other provisions, if any:

Any and all lawful business

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#### **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
JULIO FLORES
Address
CENTRO COMERCIAL MORAN MURCIA, TERCERA CALLE PONIENTE
SEGUNDA PLANTA LOCAL # 11
SANTA TECLA
LA LIBERTAD
EL SALVADOR
1511

## **Article VI**

The effective date for this Limited Liability Company shall be:

## 11-19-2021

This Hores

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

#### **JULIO FLORES**

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.