

1/7/22, 16:36

From Lupa Enterprises Inc 0.727.914.5890 Fri Jul 1 20 25:24 2022 LLC Page 1 of 4  
Division of Corporations

L71000503523

Florida Department of State  
Division of Corporations  
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Fax Number : (850)617-6383

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.\*\***

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J DENNIS  
JUL 05 2022

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

**BOOST EMPRESARIAL LLC**

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/29/2021 and assigned Florida document number L21000503523

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

*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.*

**If Changing Registered Agent, Signature of New Registered Agent**

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>TORRES RUIZ, MONICA LORENA</u>	<u>CALLE 58 N #5BN-75 TORRE 7 APTO 307</u>	<input type="checkbox"/> Add
		<u>CALI, VALLE DEL CAUCA</u>	<input checked="" type="checkbox"/> Remove
		<u>760050 CO</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>ALEJANDRA MARIA PRENTT RINCON</u>	<u>CALLE 6B SUR #37-51 APTO 803</u>	<input checked="" type="checkbox"/> Add
		<u>MEDELLIN, COLOMBIA 050022</u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
		<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
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