

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L220003034977

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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 : (727)914-5090

SECRETARY OF STATE
TALLAHASSEE, FL

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****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

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LATAM FUSION LLC**

Certificate of Status	0
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C. BRUMBLEY
SEP - 6-2022

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LATAM FUSION 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 01/31/2022 and assigned
Florida document number L22000033977.

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>
MGR	DAVID ELIO ZABALA MERCADO	Barrio Mery Schefflen Octavo Anillo Doble	
		Via a la Guardia no.8220	<input type="checkbox"/> Add
		Santa Cruz de la Sierra Bolivia, 591	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Reynaldo Ulises Herrera Ferrada	Calle Elda Viera 4115	
		Santa Cruz de la Sierra, Bolivia 591	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Luis Felipe Dorado Middagh	Barrio Aeronáutico Calle oasis N° 2025	
		Santa Cruz de la Sierra, Bolivia 591	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Filing Fee: \$25.00