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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 : (727)914-5090 Fax Number

\*\*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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#### FLORIDA LIMITED LIABILITY CO. **UP LOGISTIC SERVICES LLC**

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# Articles Of Organization For Florida Limited Liability Company

### Article I

The name of the Limited Liability Company is:

UP LOGISTIC SERVICES LLC

## Article II

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

114 NW 25th Street Suite 33, Office 867 Miami, Florida 33127 United State of America

The mailing address of the Limited Liability Company is:

114 NW 25th Street Suite 33, Office 867 Miami, Florida 33127 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 100 SE 2nd Street Suite 2000 Miami, Florida 33131 United State of America



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..

2023 APR 14 PM 3: 33

# **Article V**

The name and address of each person(s) authorized to manage and control the Limited Liability Company:

Title: MGR Omar Franco Address

Calle 15 #16-15 torre 6 apto 904 conjunto tulipanes Facatativá Cundinamarca Colombia 253051

Title: MGR

Maria Jova Rubiano

**Address** 

Calle 15 #16-15 torre 6 apto 904 conjunto tulipanes Facatativa Cundinamarca Colombia 253051

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# **Article VI**

The effective date for this Limited Liability Company shall be:

04-13-2022

De Franco

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

#### **Omar Franco**

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 \$.817.455, F.S.