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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

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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FLORIDA LIMITED LIABILITY CO.
DIET NUTRITION LLC

Certificate of Status	0
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Help

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

DIET NUTRITION LLC

Article II

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

**114 NW 25th Street
Suite 33, Office 904
Miami, Florida 33127
United State of America**

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SECRETARY OF STATE
ALLAHABAD, FLORIDA

The mailing address of the Limited Liability Company is:

**114 NW 25th Street
Suite 33, Office 904
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**



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 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..

2022 MAY -4
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FILE

Article V

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

Title: MGR

Menna Ileana Aguilera Sandoval

Address

Torre Agalta, bulevard Morazan, Tegucigalpa, Honduras
Tegucigalpa
Francisco morazán
Honduras
11101

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Article VI

The effective date for this Limited Liability Company shall be:

05-04-2022



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

Menna Ileana Aguilera Sandoval

Name of signee

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
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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.