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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

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

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOQU	IET LLC				
(Name of the Limited Liability Com (A Florida Limited	pany as it now appear Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Compan		06/20/2022	and assig	ned	
rionda document minioci					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company h	<u>ere</u> :			
WOKET (SROUP LLO				
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the c	esignation "LLC" or the abb	reviation "L.L.	C."	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
			<u>-</u>	022	
			-	30	
Enter new mailing address, if applicable:			:		
(Mailing address MAY BE A POST OFFICE BOX)			٠	ক i · -	
			431	3	
			, ·(م بو	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our r	ecords, <u>enter the name</u>	of the new	restered	
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>	Name	Address	Type of Action
MGR	MANUEL MARIA MOSQUERA FERNANDEZ DE SOTO	CARRERA 101 NUMERO 15-08 CALI COLOMBIA 760001	□ Add
			Remove
			□Change
MGR	ENRIQUE VALLEJO URIBE	Calle 6 # 114-170 Bogota,Colombia 110110	\$ Add
			Remove
		<u></u>	2022 OCT 12
			DAdd T
			□Remov 29. □Change 0
			□ Add
			□Remove
			□Change
		·	🗀 Add
			□Remove
			Change
			[]Add
			□Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	08
E. Effective date, if other than the date of filing:	7 (3)(b) s (he
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	:
Dated September 12 2022	
ALVARO ANDRES RAMÁREZ PARRA Signature of a member or authorized representative of a member	
•	

From Lupa Enterprices Inc 1.727.914.5090 Wed Oct 12 19:10:25 2022 UTC Page 4 of 4

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