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From:

Account Name : LUPA ENTERPRISES INC

Account Number : 120200000050 Phone : (727)298-8007 Fax Number : (727)914-5090

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#### FLORIDA LIMITED LIABILITY CO.

#### Servicios de Consultoria Informaticos LLC

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# Articles Of Organization For Florida Limited Liability Company

## **Article I**

The name of the Limited Liability Company is:

Servicios de Consultoría Informáticos LLC

## Article II

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

1900 N Bayshore Dr., Suite 1A #136-1396 Miami, Florida, 33132 United State of America

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr., Suite 1A #136-1396 Miami, Florida, 33132 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..

# **Article V**

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

Title: MGR Fernando Arce Address

AV Caseros Esq Iomas de zamora (Barrio Privado NQ) Quilmes Buenos Aires Argentina 1876

Title: MGR

Elias Emiliano Exposito

#### Address

Av slvador Maria del Carril 4961 Villa Deboto Buenos Aires Argentina 1419 From Lupa Enterprices Inc 1.727.914.5090 Fri Oct 7 20:47:33 2022 UTC Page 5 of 5

## **Article VI**

The effective date for this Limited Liability Company shall be:

10-07-2022

Fernado Ale

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

#### Fernando Arce

Name of signee

4.0

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.