

**L22000394636**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000394636 3)))



H22000394636ABC2

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

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.\*\***

Email Address: info@usacorporationservices.com

**FLORIDA LIMITED LIABILITY CO.  
SMART IMPORT COMPANY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

2022 Nov 18 PM 4:39

2022 Nov 18 AM 3:30

Electronic Filing Menu

Corporate Filing Menu

Help

# **Articles Of Organization For Florida Limited Liability Company**

## **Article I**

The name of the Limited Liability Company is:

**SMART IMPORT COMPANY LLC**

## **Article II**

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

**1900 N Bayshore Dr Suite 1A #136-1574  
Miami, Florida, 33132  
United States**

The mailing address of the Limited Liability Company is:

**1900 N Bayshore Dr Suite 1A #136-1574  
Miami, Florida, 33132  
United States**

## **Article III**

Other provisions, if any:

**Any and all lawful business**

11/18/2022 8:30 PM

## **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 States**



---

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, 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..

11/18/2022 8:03:30 PM

## **Article V**

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

Title: MGRM  
Diana Reategui  
Address:  
villareal 115  
LA PERLA  
CALLAO  
Peru  
07011

Title: MGRM  
Juan Reategui  
Address:  
Villareal 115  
La Perla  
Callao  
Peru  
07011

Title: MBR  
Eduardo Ruidias  
Address:  
391 MIRO DR DAVENPORT FLORIDA  
DAVENPORT  
FLORIDA  
United States  
33837

11/18/2022 20:28:58 UTC

## Article VI

The effective date for this Limited Liability Company shall be:

01 / 02 / 2023

*Diana Reategui*

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

Diana Reategui

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 s.817.155, F.S.

13:53:17 9/16/2022