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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

Phone : (727)298-8007 Fax Number : (305)397-0980

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: filings@usacorporationservices.com

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To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ALVASF					
Name of the Limited Liability Com (A Florida Limited	pany as it now appears I Liability Company)	on our records.)			
Fire will be a second of this Limited Liability Companies of Organization for this Limited Liability Companies of the Articles of Organization for this Limited Liability Companies of the Articles of Organization for this Limited Liability Companies of the Articles of Organization for this Limited Liability Companies of the Articles of Organization for this Limited Liability Companies of Organization for the Organization	v wara filad on	12/15/2022			
	ly were filed on	12/10/2022		and assi	igned
Florida document number <u>L22000525452</u>					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :			
Alvaro Lope	z LLC				
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the de-	signation "LLC" or the	abbrev	iation "L.I	C."
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
			<u>;n</u>	28-	·
No. of the control of		.		024 OCT	
Enter new mailing address, if applicable:				CŢ	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		,		01	i
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B. If amending the registered agent and/or registered office	address on our red	ords, <u>enter the na</u>	meer	the new	registere
agent and/or the new registered office address here:			إسا		
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florid	la street address			-
		, Florida			
	City		7.	ip Code	
New Registered Agent's Signature, if changing Registered Agent	ı <u>.</u>				

I hereby liccept 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.

From.	Luis	Grillo

Fax: 18885334730

To:

Fax: (850) 617-6381

Page: 3 of 5

10/10/2024 14:26

Change

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 = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
•			🗆 Remove
			□Change
			DAdd
			🗆 Remove
		<u> </u>	□Change
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To:

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Not	effective date, if other than the date of filing:
.: the rec cord is	cord 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 filed.
Date	ed October 10 , 2024 .
	Alvaro Lopez Caro Signature of a member or authorized representative of a member
	Signature of a member or authorized fepresentative of a member
	ALVARO LOPEZ CALVO
	Typed or printed name of signee