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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

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Email Address: info@usacorporationservices.com

#### FLORIDA LIMITED LIABILITY CO.

#### Tecplan LLC

| Certificate of Status | 0        |
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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:

Tecplan LLC

#### Article II

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

1900 N Bayshore Dr Suite 1A #136 -1897 Miami, Florida, 33132 **United States** 

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-1897 Miami, Florida, 33132 **United States** 

#### 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 States** 

Luciana Mordini 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.



## Article V

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

Title: MGR Jorge Rivera

Address: Calle Jose Cecilio del Valle N2 Col. Escalon.

San Salvador San Salvador El Salvador 1101

Title: MGRM

Ana Alejandra Aylagas

Address: Calle Jose Cecilio del Valle N2 Col. Escalon.

San Salvador San Salvador El Salvador 1101

## **Article VI**

The effective date for this Limited Liability Company shall be:

02 / 10/ 2023

Jorge Rivera

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

Jorge Rivera

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 fellow as provided for in s.817.155, F.S.