3/27/23, 8.33 AM

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.

(((H230001145213)))



H2300011452134ECT

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

Electronic Filing Menu — Corporate Filing Menu

Account Number : 120200000050 Phone : (727)298-8007 : (305)397-0980 Fax Number

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

filings@usacorporationservices.com Email Address:___

FLORIDA LIMITED LIABILITY CO.

Group SAMC Services LLC

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

Help

£19.

3/27/23, 8:31 AM

usacorporationservices - USACorporation

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

Group SAMC Services LLC

Article II

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

1900 N Bayshore Dr Suite 1A #136 -2082 Miami, Florida, 33132 United States 12023 MAR 27 PH II: 59
TORATE OF STATE
TALLAMASSEE, FL

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-2082 Miami, Florida, 33132 United States

Article III

Other provisions, if any:

Any and all lawful business

3/27/23, 8 31 AM

usacorporationservices - USACorporation

Article IV

The name and Florida street address of the registered agent is:

USA CORPORATION SERVICES

Lupa Enterprises INC

100 SE 2nd Street Suite 2000 Miami, Florida, 33131 **United States**

+1 (727) 298-8007

info@usacorporationservices.com

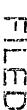
Luciana Mordini

Registered Agent's Signature

Registered Agent's Signature

ASS

PHaving 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: MGRM

Santiago Alejo Molinero Calderon

Address: Collins Ave 19370

Sunny Isles Florida

United States

33160

12023 MAR 27 PHII: 59

3/27/23, 8:31 AM

usacorporationservices - USACorporation

Article VI

The effective date for this Limited Liability Company shall be:

03 / 24/ 2023

Santiago Alejo Molinero Calderon

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

Santiago Alejo Molinero Calderon

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

12023 MAR 27 PM II: 59
-WILLIAMY OF STATE
TAIL AMASSEE FI