#### Florida Department of State

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Division of Corporations

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From:

Account Name : LUPA ENTERPRISES INC

Account Number : I2020000050 Phone : (727)298-8007 : (305)397-0980 Fax Number

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#### FLORIDA LIMITED LIABILITY CO. EIS MAQUINARIAS SAC - SUCURSAL DE EE.UU. LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

4/27/23, 9:56 AM

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# Articles Of Organization For Florida Limited Liability Company

#### Article I

The name of the Limited Liability Company is:

EIS MAQUINARIAS SAC - SUCURSAL DE EE.UU. LLC

#### Article II

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

1900 N Bayshore Dr Suite 1A #136 -2213
Miami, Florida, 33132
United States

2023 APR 27 PH 12: 48
SECRETARY OF STATE
TALLAHASSEE, FL

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-2213
Miami, Florida, 33132
United States

## Article III

Other provisions, if any:

Any and all lawful business

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### **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

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SECRETARY OF STATE
TALLAHASSEE, FL

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...

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# Article V

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

Title: MGRM

Jose Hernan Hermoza Leon

Address: 3770 NE 171 ST APT 601 NORTH MIAMI BEACH FL 33160

MIAMI FLORIDA United States

33160

SECRETARY OF STATE

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### **Article VI**

The effective date for this Limited Liability Company shall be:

04 / 26/ 2023

Jose Hernan Hermoza Leon

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

Jose Hernan Hermoza Leon

Name of signee

SECRETARY OF STATE

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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.