

5/24/23, 8:22 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC
Account Number : 120200000050
Phone : (727)298-8007
Fax Number : (305)397-0980

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DIVISION OF
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INVERSIONES URIBE LOPETEGUI GROUP LLC

Certificate of Status	0
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Corporate Filing Menu

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MAY 26 2023

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

INVERSIONES URIBE LOPETEGUI GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/10/2023 and assigned Florida document number L23000231576

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

21165 Helmsman Drive, G14,

Aventura, Florida, 33180, United State

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

21165 Helmsman Drive, G14,

Aventura, Florida, 33180, United State

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Consuelo Vilar

New Registered Office Address:

21165 Helmsman Drive, G14

Enter Florida street address

Aventura

City

Florida

33180

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 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.

Consuelo Vilar

If Changing Registered Agent, Signature of New Registered Agent

2023 MAY 25 PM 2:47
LLC

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	URIBE LOPETEGUI, CLAUDIO	Robinson Crusoe 1100	<input type="checkbox"/> Add
		Depto 82, Las Condes	<input type="checkbox"/> Remove
		Región Metropolitana, Chile, 7570668	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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Dated May 24, 2023

Signature of a member or authorized representative of a member:

Typed or printed name of signee

Filing Fee: \$25.00