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Division of Corporations

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: (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050 Phone

: (727)298-8007

Fax Number

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From: Luis Grillo

Fax: 18885334730

Fax: (850) 617-6381

Page: 3 of 5

2/2/2024 14:04

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CREATIONS LL			
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears ( ability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company	were filed on	06/15/2023	and assigne	ed
Florida document number <u>L23000289414</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	lity company here	<u>e</u> :		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the desi	ignation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:			<b>202</b> SE	
(Principal office address MUST BE A STREET ADDRESS)		A C		
		A	 	1233 1233
		SA	- N I	· <del>**</del> 5
Enter new mailing address, if applicable:		SE		
(Mailing address MAY BE A POST OFFICE BOX)		-1	· •	ines <sup>†</sup>
The state of the s			<u></u>	
B. If amending the registered agent and/or registered office adent and/or the new registered office address here:	ddress on our rec	ords, <u>enter the name</u>	of the new re	gisterec
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Floride	a sireet address		
		Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of m rovided for in Ch	y duties, and I am fa apter 605, F.S. Or. ij	miliar with ar Tthis documer	nd

From: Luis érillo

Fax: 18885334730

To:

Fax: (850) 617-6381

Page: 4 of 5

2/2/2024 14:04

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>	Type of Action
MGRM	LUIS FERNANDO MELGAR ARIAS	308 LOMITA ST. SANTA FE	[X] Add
		NEW MEXICO, 87505	Remove
			□Change
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To:

. 11 amendir	ng any other information, en	ter change(s) here: {	(Attach additional s	heets, if necessary.)	
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Effective d	late, if other than the date of	filing:	deta of till an are more than	(optional)	ou o 605 0207 (2)
Note: If the	e date inserted in this block does effective date on the Departmen	not meet the applicable	e statutory filing requ	irements, this date will not	t be listed as the
he record spe ord is filed.	cifies a delayed effective date, bu	it not an effective time.	, at 12:01 a.m. on the	earlier of: (b) The 90th c	lay after the
Dated	FEBRUARY 02	,2024			
		Laurence S	mith, Marti	n	
-	Signature	of a member or authorize	ed representative of a n	ember	<u> </u>
		LAURENCE SI	MITH, MARTIN		