

7/19/23, 9:00 AM

123000342496

Florida Department of State  
Division of Corporations  
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

((H23000252013 3))



H2300025201334BCS

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

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

Email Address: filings@usacorporationservices.com

FLORIDA LIMITED LIABILITY CO.  
AJ Integration LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED  
2023 JUL 19 PM 12:14  
CORPORATIONS  
COMMERCIAL  
SERVICES

FILED  
2023 JUL 19 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

7/19/23, 8:46 AM

usacorporationservices - USACorporation

# Articles Of Organization For Florida Limited Liability Company

## Article I

The name of the Limited Liability Company is:

AJ Integration LLC

## Article II

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

1900 N Bayshore Dr Suite 1A #136 -2571  
Miami, Florida, 33132  
United States

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-2571  
Miami, Florida, 33132  
United States

## Article III

Other provisions, if any:

Any and all lawful business

**FILED**  
2023 JUL 19 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

7/19/23, 8:48 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

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..

**FILED**  
2023 JUL 19 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

7/19/23, 8:46 AM

usacorporationservices - USACorporation

## Article V

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

Title: MGRM

Aaron Sarabia Rodriguez

Address: Camino de la Via No 3

Juan C Bonilla

Puebla

Mexico

72640

Title: MBR

Jeanette Sarabia Rodriguez

Address: Camino de la Via No 3

Juan C Bonilla

Puebla

Mexico

72640

**FILED**  
2023 JUL 19 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FL

7/19/23, 8:46 AM

usacorporationservices - USACorporation

## Article VI

The effective date for this Limited Liability Company shall be:

07 / 18/ 2023

Aaron Sarabia Rodriguez

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

Aaron Sarabia Rodriguez

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

FILED  
2023 JUL 19 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FL