8/7/23, 4:17 PM

# The da Leptrement of Stre Note that the second contains the secon

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.

(((H230002741793)))



H230002741793AECT

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 : I20200000050 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

M. VELVED 23 AUG II (M. R. D.

### FLORIDA LIMITED LIABILITY CO. HOME AND CONSULTANTS GROUP LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

3 AUG 11 PM 2

disacorporationservices - USACdrporation

## Articles Of Organization For Florida Limited Liability Company

#### Article I

The name of the Limited Liability Company is:

HOME AND CONSULTANTS GROUP LLC

#### Article II

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

1900 N Bayshore Dr Suite 1A #136 -2647 Miami, Florida, 33132 United States

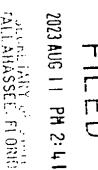
The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-2647 Miami, Florida, 33132 United States

#### Article III

Other provisions, if any:

Any and all lawful business



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 turther 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..

usacorporationservices - USACorporation

#### Article V

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

Title: MGRM

Carlos Feliz Ramirez

Address: calle 2da No.165 urbanización villa maría

villa mella

santo domingo norte Dominican Republic

11301

Title: MBR

Ashley Febres Sosa

Address: CALLE 2DA No.165 urbanización villa maría

villa mella

Santo Domingo

Dominican Republic

11301

2023 AUG 11 PM 2: 4

usacorporationservices - USACorporation

#### **Article VI**

The effective date for this Limited Liability Company shall be:

08 / 05/ 2023

Carlos Feliz Ramirez

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

Carlos Feliz Ramirez

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.

