

From: Luis Grillo  
25/10/2023 12:28

Fax: (850) 617-6381

To:

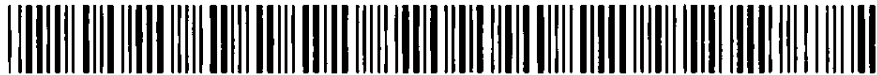
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To:

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

FLORIDA LIMITED LIABILITY CO.  
octopgroup investments LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 05       |
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TALLAHASSEE, FL

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TM

**Articles Of Organization For**  
**Florida Limited Liability Company**

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CLERK OF STATE  
TALLAHASSEE, FL

**Article I**

The name of the Limited Liability Company is:

octopgroup investments LLC

**Article II**

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

1900 N Bayshore Dr Suite 1A #136 -2979  
Miami, Florida, 33132  
United States

The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-2979  
Miami, Florida, 33132  
United States

**Article III**

Other provisions, if any:

Any and all lawful business

## 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.

## Article V

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

Title: MGRM

Nicolás Esteban Zuñiga Rohweder

Address: Camino Las Rosas 85

machali

region de ohiggins

Chile

2910000

Title: MBR

Nicole Stephanie Bravo Rubio

Address: Camino Las Rosas 85

Machali

Region de Ohiggins

Chile

2910000

## Article VI

The effective date for this Limited Liability Company shall be:

01 / 01/ 2024

*Nicolás Esteban Zuñiga Rohweder*

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

Nicolás Esteban Zuñiga Rohweder

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.