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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050 Phone : (727)298-8007 : (305)397-0980 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LATAM EXIM INTERNATIONAL TRADING LLC

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Help

K. SALY SEP 2 0 2024 To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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<u>(s.</u>)	

<u>,</u> ,	ľ	<i>' -:</i>			
$ T_{ij} \leq C_{ij}$		M/M. 19 2-3			
Latam Exim Inte	rnational Trading LLC	Sall Sill			
(<u>Name of the Limited Liability Comp</u> an (A Florida Limited Li	y as it now appears on our records.) ability Company)	MCC 1 1 2:5			
	, ·	•			
The Articles of Organization for this Limited Liability Company v	were filed on01/11/202	24 and assigned			
Florida document number <u>L24000014005</u>					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	lity company here:				
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or	the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2 S Biscayne Boulevard	Suite 3200 #2655			
(Principal office address MUST BE A STREET ADDRESS)	Miami, Florida, 3313	1, United States			
Enter new mailing address, if applicable:	2 S Biscayne Boulevard	Suite 3200 #2655			
(Mailing address MAY BE A POST OFFICE BOX)	Miami, Florida, 33131. United States				
		·			
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	e name of the new registere			
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	Emer Promute Sirver dauress				
	City.	la			
	1.11/1	7.07 COUC			

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.

MGR = Manager

Fax: 18885334730

To:

Fax: (850) 617-6381

Page: 4 of 5

19/9/2024 14:59

Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	authorized Member		
Title	Name	Address	Type of Action
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From: Luis Grillo	٠	Fax. 18885334730

Ta:

Fax: (850) 617-6381

Page: 5 of 5 19/9/2024 14:59

								
								
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