

**L24000419689**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LUPA ENTERPRISES INC  
Account Number : 120200000050  
Phone : (727)298-8007  
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FLORIDA LIMITED LIABILITY CO.  
Sunwork SPA LLC

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# Articles Of Organization For Florida Limited Liability Company

## Article I

The name of the Limited Liability Company is:

Sunwork SPA LLC

## Article II

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

2 S Biscayne Boulevard Suite 3200 #4385  
Miami, Florida, 33131  
United States

The mailing address of the Limited Liability Company is:

2 S Biscayne Boulevard Suite 3200 #4385  
Miami, Florida, 33131  
United States

## Article III

Other provisions, if any:

Any and all lawful business

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## 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*

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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

Cedric Antonio Campos Vega

Address: Avenida Iquique 5475 Antofagasta

Antofagasta

Segunda Región

Chile

1201516

## Article VI

The effective date for this Limited Liability Company shall be:

10 / 03 / 2024

*Cedric Antonio Campos Vega*

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

Cedric Antonio Campos Vega

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.

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