

28/10/24, 13:01

Division of Corporations

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Florida Department of State  
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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.  
DIMACRISUR GLASS SERVICES LLC

Certificate of Status	0
Certified Copy	0
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T-3.4  
10/29/24

# Articles Of Organization For Florida Limited Liability Company

## Article I

The name of the Limited Liability Company is:

**DIMACRISUR GLASS SERVICES LLC**

## Article II

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

**2 S Biscayne Boulevard Suite 3200 #4533  
Miami, Florida, 33131  
United States**

The mailing address of the Limited Liability Company is:

**2 S Biscayne Boulevard Suite 3200 #4533  
Miami, Florida, 33131  
United States**

## Article III

Other provisions, if any:

**Any and all lawful business**

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

## 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..

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## Article V

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

Title: MGRM

Aldo Mendoza

Address: C48 No 481A x 51 Y 49

Merida

Yucatan

Mexico

97000

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TALLAHASSEE, FLORIDA**

28/10/24, 12:59

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## Article VI

The effective date for this Limited Liability Company shall be:

01 / 01/ 2025

*Aldo Mendoza*

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

Aldo Mendoza

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.

3/2/25

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