

29/11/24, 9:42

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Cover Sheet

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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.

Get Your Mana LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDASECRETARY OF STATE
TALLAHASSEE, FL

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

Get Your Mana LLC

Article II

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

2 S Biscayne Boulevard Suite 3200 #4706
Miami, Florida, 33131
United States

The mailing address of the Limited Liability Company is:

2 S Biscayne Boulevard Suite 3200 #4706
Miami, Florida, 33131
United States

Article III

Other provisions, if any:

Any and all lawful business

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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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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Article V

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

Title: MGR

Martina Lavigne

Address: 3 de febrero 2901

CABA

CABA

Argentina

1429

Title: MGR

Cloé Lavigne

Address: 3 de febrero 2901

caba

caba

Argentina

1429

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TALLAHASSEE, FLORIDA

Article VI

The effective date for this Limited Liability Company shall be:

01 / 01/ 2025

Martina Lavigne

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

Martina Lavigne

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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