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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 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. \*\*

filings@usacorporationservices.com Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SERVICES GONZALEZ LIMITADA LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Services Gonzalez Li	mitada LLC				
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) apany)				
The Articles of Organization for this Limited Liability Company were filed	on 01/09/2025	and assigned			
Florida document numberL25000013009					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability compa	any here:				
The new name must be distinguishable and contain the words "Limited Liability Company	," the designation "LLC" or the abbr	eviation "L.L.C."			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	-1	202			
		S SB			
Enter new mailing address, if applicable:	575 275	-5			
(Mailing address MAY BE A POST OFFICE BOX)	115	2			
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<del></del>	<u></u>	<u>ü</u>			
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, enter the name	of the new registered			
Name of New Registered Agent:					
New Registered Office Address:	ter Florida street address				
City	Florida	Zip Code			
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.

From: Luis:Grillo

Fax: +18885334730

To:

Fax: +18506176381

Page: 4 of 5

05/09/2025 14:43

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MBR	Patricio Alexis Aravena Antero	Volcán Tolhuaca 14086 . San Bernado. CHILE.	[X∖Add
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(If an effective Note: If th	late, if other than the date of date is listed, the date must be speed ate inserted in this block dost effective date on the Departm	cific and cannot be prior to dat es not meet the applicable :	(optional) c of filing or more than 90 days after filing.) Pure statutory filing requirements, this date will	suant to 605.0207 (3 not be listed as th
he record spo ord is filed.	ecifies a delayed effective date.	but not an effective time, a	t 12:01 a.m. on the earlier of: (b) The 90	th day after the
Dated	September 05			
		Marcelo Eduardo	Gonzalez Montoya	
-	Signati	ire of a member or authorized		

Typed or printed name of signee