Division of Corporations

Florida Department of State

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LUPA ENTERPRISES INC

Account Number : 120200000050 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:

FLORIDA LIMITED LIABILITY CO.

Kossi LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
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Electronic Filing Menu

Corporate Filing Menu

Help

Article I

The name of the Limited Liability Company is:

Kossi LLC

Article II

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

2 S Biscayne Boulevard Suite 3200 #5815 Miami, Florida, 33131 United States

The mailing address of the Limited Liability Company is:

2 S Biscayne Boulevard Suite 3200 #5815 Miami, Florida, 33131 United States

<u>Article III</u>

Other provisions, if any:

Any and all lawful business

Article IV

wii_ED

7925 FIG 19 PM 2: 15
The name and Florida street address of the registered agent is: STATE

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..

Article V

FILED

2025 AUG 19 PM 2: 15

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

Title: MGRM

Matias Hugo Arrau Perez

Address: Cuarto Centenario Avenida 1841 Las Condes/Santiago

Santiago

Region Metropolitana

Chile

7571517

De: Luis Grillo"

Fax: +18885334730

Para:

Fax: +18506176381

Pagina: 6 de 6

19/8/2025 09:07

19/8/25, 7:58 usacorporationservices - USACorporation

Article VI

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2025 AUG 19 PM 25

The effective date for this Limited Liability Company shall be: 11: STATE

08 / 18 / 2025

0

Matias Hugo Arrau Perez

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

Matias Hugo Arrau Perez

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.