

Apr 23 20, 12:01p

Lupa Enterprises INC

272980007

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2/4/2023

Division of Corporations

Florida Department of State  
Division of Corporations  
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From: Account Name : LUPA ENTERPRISES INC  
Account Number : I20200000050  
Phone : (727)560-0307  
Fax Number : (727)298-8007

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: INFO@USACORPORATIONSERVICES.COM

FLORIDA PROFIT/NON PROFIT CORPORATION  
EAATA INC

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Lupa Enterprises INC

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April 23, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LUPA ENTERPRISES

SUBJECT: EAATS INC

REF: W20000040235

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April 23, 2020

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LUPA ENTERPRISES

SUBJECT: EAATS INC  
REF: W20000040235

Please check the cover well. The name written on the title page is EAATA INC.  
The name Eaats was not written, that's a mistake

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: EAATA INC**ARTICLE II PRINCIPAL OFFICE**Principal street address  
500 CLEVELAND ST. STE 393.  
CLEARWATER, FL 33755

Mailing address, if different is:

SAME OF PRINCIPAL**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Import, Export wholesales of equipment for  
mechanical workshops and training center.**ARTICLE IV SHARES**The number of shares of stock is: 1500**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Navarrete Wegge, Pablo. PTEName and Title: Colangelo Mariano, Enzo Adrian. V.PTAddress C. del Pensamiento 5 E3 P01  
Madrid  
EspañaAddress: Calle Abaran 13 San Javier  
Murcia  
EspañaName and Title: Guasch Alverti, Victor. Mgr

Name and Title: \_\_\_\_\_

Address C. Magui Vilardell 3  
Moia  
España

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Lupa Enterprises Inc. Luciana Mordini  
Address: 4 North Jupiter Ave  
CLEARWATER, FL 33755

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Luciana Mordini  
Address: 4 North Jupiter Ave  
CLEARWATER, FL 33755

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Luciana Mordini

Required Signature/Registered Agent

04/22/2020

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

Luciana Mordini

Required Signature/Incorporator

04/22/2020

Date

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