Fax: 18885334730

To:

Fax: (850) 617-6381 Division of Corporations Page: 2 of 6

1/8/2024 12:36

Florida Department of State

Division of Corporation

(((H24000259206 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LUPA ENTERPRISES INC

Account Number : I20200000050 : (727)298-8007 Phone 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.

Tatengue Store LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125,00

Electronic Filing Menu Corporate Filing Menu

Help

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

Tatengue Store LLC

Article II

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

1900 N Bayshore Dr Suite 1A #136 -4047 Miami, Florida, 33132 United States

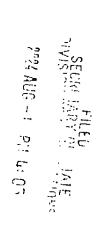
The mailing address of the Limited Liability Company is:

1900 N Bayshore Dr Suite 1A #136-4047
Miami, Florida, 33132
United States

Article III

Other provisions, if any:

Any and all lawful business



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 nereby 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..

Fax: 18885334730

To:

Fax: (850) 617-6381 usacorporationservices - USACorporation

Page: 5 of 6

1/8/2024 12:36

Article V

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

Title: MGRM

Hugo Gabriel Vento

Address: Venezuela 2027

Buenos Aires Buenos Aires Argentina 1096

Title: MBR

Valeria Ivana Ortiz

Address: 9 De Julio 6972

Santa Fe Santa fe Argentina 3000 Fax: 18885334730

To:

Fax: (850) 617-6381

Page: 6 of 6

1/8/2024 12:36

usacorporationservices - USACorporation

Article VI

The effective date for this Limited Liability Company shall be:

07 / 31/ 2024

Hugo Gabriel Vento

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

Hugo Gabriel Vento

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.