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From:

Account Name : LUPA ENTERPRISES INC

Account Number : 120200000050

: (727)298-8007

Fax Number : (305)397-0980

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FLORIDA LIMITED LIABILITY CO. MIAMI LATIN UNIVERSITY LLC

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Help

SCHALLANDS

Articles Of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

MIAMI LATIN UNIVERSITY LLC

Article II

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

2 S Biscayne Boulevard Suite 3200 #4878 Miami, Florida, 33131 United States

The mailing address of the Limited Liability Company is:

2 S Biscayne Boulevard Suite 3200 #4878
Miami, Florida, 33131
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 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

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

Title: MGRM

Javier Octavio Rivera Gómez Address: Calle 40 No. 25a 64

Bogotá

Cundinamrca Colombia 33335

Title: MGRM

Javier Eduardo Rivera Mora

Address: Calle 40 No. 25a 64 Oficina 103

Bogotá

Cundinamarca Colombia 33335

1025 JULY - 2 MAY 11:57

Fax: +18885334730

To:

Fax: +18506176381 usacorporationservices - USACorporation

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Article VI

The effective date for this Limited Liability Company shall be:

01 / 02/ 2025

Javier Octavio Rivera Gómez

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

Javier Octavio Rivera Gómez

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.

