

# Florida Department of State

**L250000178024371**

Division of Corporations  
Electronic Filing Cover Sheet

1/16/25

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H25000017802 3)))



H250000178023ABCZ

**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  
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.\*\***

Email Address: filings@usacorporationservices.com

## FLORIDA LIMITED LIABILITY CO. PERFORMANCE IT LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

RECEIVED

2025 JAN 15 PM 12:48

2025 JAN 15 PM 12:48

Electronic Filing Menu

Corporate Filing Menu

Help

25 JAN 15 AM 9:56

FILED  
SECRETARY OF STATE  
TALLAHASSEE

# Articles Of Organization For Florida Limited Liability Company

## Article I

The name of the Limited Liability Company is:

**PERFORMANCE IT LLC**

## Article II

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

**2 S Biscayne Boulevard Suite 3200 #4956  
Miami, Florida, 33131  
United States**

The mailing address of the Limited Liability Company is:

**2 S Biscayne Boulevard Suite 3200 #4956  
Miami, Florida, 33131  
United States**

## Article III

Other provisions, if any:

**Any and all lawful business**

FILED  
SECRETARY OF STATE  
25 JAN 15 AM 9:56

## **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**

**Carlos Andres Alvarado Novoa**

**Address: Cra 13 No 93 35 Oficina 700**

**Bogotá**

**Bogotá**

**Colombia**

**11001000**

## Article VI

The effective date for this Limited Liability Company shall be:

01 / 14/ 2025

Carlos Andres Alvarado Novoa

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

Carlos Andres Alvarado Novoa

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.

FILED  
SECRETARY OF STATE  
25 JAN 15 AM 9:56  
TALLAHASSEE, FLORIDA