

4/8/22, 15:32

From Lupa Enterprises Inc. 727... The Au... 1... 4... 2022... TC... of 6

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**FLORIDA LIMITED LIABILITY CO.**

**Enjoy LLC**

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COUNTY OF STATE  
CORPORATION SERVICES

**DATE:** 8/4/2022

**NAME:** Enjoy LLC

**TYPE OF FILING:** ARTICLES OF ORGANIZATION

# Articles Of Organization For Florida Limited Liability Company

## Article I

The name of the Limited Liability Company is:

Enjoy LLC

## Article II

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

**1900 N Bayshore Dr., Suite 1A #136-1190  
Miami, Florida, 33132  
United State of America**

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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The mailing address of the Limited Liability Company is:

**1900 N Bayshore Dr., Suite 1A #136-1190  
Miami, Florida, 33132  
United State of America**

## Article III

Other provisions, if any:

**Article IV**

The name and Florida street address of the registered agent is:

**Lupa Enterprises INC  
100 SE 2nd Street Suite 2000  
Miami, Florida 33131  
United State of America**



\_\_\_\_\_  
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

LED

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: MGR**

Stefanny Victoria Ramirez Garcia

**Address**

Calle 153#16C-34

Bogotá

Bogotá D.C

Colombia

110111

**Title: MGR**

José Gregorio Baquero Ortiz

**Address**

Calle 153#16C-34

Bogotá

Bogotá D.C

Colombia

110111

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**Article VI**

The effective date for this Limited Liability Company shall be:

**08-04-2022**

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*Stefanny Victoria Ramirez Garcia*

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

**Stefanny Victoria Ramirez Garcia**

Name of signee

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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.