

1/24/25, 4:34 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.

(((H25000029004 3)))



H25000029004 3ABCW

**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 : FERNANDEZ LEGAL  
Account Number : I20190000058  
Phone : (407)574-5009  
Fax Number : (407)574-5953

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

Email Address: mariag@bulula.com

RECEIVED

2025 JAN 24 PM 4:48

FLORIDA LIMITED LIABILITY CO.  
BLAMA US, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 01       |
| Estimated Charge      | \$125.00 |

2025 JAN 24 AM 11:37  
STATE

FILED

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

ma

KB

((H25000029004 3)))

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

Blama US, LLC

**ARTICLE II - Address**

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

2127 Brickell Avenue  
Apt 3202  
Miami, FL 33129

The mailing address of the Limited Liability Company is:

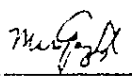
2127 Brickell Avenue  
Apt 3202  
Miami, FL 33129

**ARTICLE III - Registered Agent and Office and Registered Agent's Signature**

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

Maria Gonzalez Inclan  
2127 Brickell Avenue  
Apt 3202  
Miami, FL 33129

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, Florida Statutes.

By:   
(Registered Agent's Signature)  
Maria Gonzalez Inclan

((H25000029004 3)))

#### ARTICLE IV – Authorized Person(s)

The name and address of the person authorized to manage this Limited Liability Company is:

Title: Manager  
Maria Gonzalez Inclan  
2127 Brickell Avenue  
Apt 3202  
Miami, FL 33129

#### ARTICLE V – Effective Date

The effective date for this Limited Liability Company shall be:

January 24, 2025



(Signature of a member or an authorized representative of a member)

Maria Gonzalez Inclan  
Authorized Representative of a Member

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

FILED  
2025 JAN 24 AM 11:34  
STATE OF FLORIDA  
TALLAHASSEE