

NI 600333497096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

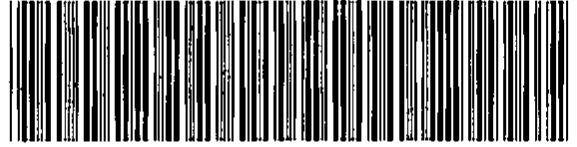
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLY & ENTERPRISE, LLC

Y SCOTT

SEP 18 2019

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BLUE MAIL S.A LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SURELY MOLINA

Name of Person

GLOBAL ACCOUNTING AND TAX PROFESSIONAL CORP

Firm/Company

7500 NW 25 ST SUITE 246

Address

MIAMI FL 33122

City/State and Zip Code

smolina@usa-contabilidad.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SURELY MOLINA

305

640-5951

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy



\$160.00 Filing Fee, Certificate  
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BLUE MAIL S.A LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

BLUE MAIL S.A LLC FL

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. ARGENTINA  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. APPLY FOR  
(FEI number, if applicable)

4. 10/01/2019  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. C/O 7500 NW 25 ST  
(Street Address of Principal Office)

6. C/O 7500 NW 25 ST  
(Mailing Address)

SUITE 246

SUITE 246

MIAMI FL 33122

MIAMI FL 33122

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

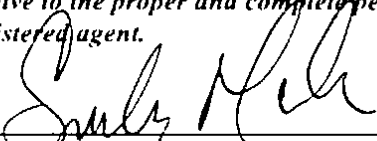
Name: SURELY MOLINA

Office Address: 7500 NW 25 ST SUITE 246

MIAMI, Florida 33122  
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

  
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☒ Manager Name: ESTEBAN MAMONE  
☐ Member Address: 7500 NW 25 ST SUITE 246  
☐ Authorized MIAMI FLORIDA 33122  
Person  
☐ Other ☐ Other

**Title or Capacity:** **Name and Address:**

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

*Esteban Mamone*

Signature of an authorized person

ESTEBAN MAMONE

Typed or printed name of signer

TRADUCCION PUBLICA -----

CERTIFIED TRANSLATION -----

[Seal of the Argentine Republic] -----

Argentine Republic – National Executive Power -----

2019 – Year of Exports -----

CERTIFICATE -----

Number: CE-2019-69772940-APN-DA#IGJ -----

Autonomous City of Buenos Aires -----

Monday 5<sup>th</sup> August, 2019 -----

Reference: Certificate of Good Standing of BLUE MAIL S.A. 1666226 -----

IT IS HEREBY CERTIFIED THAT: the company BLUE MAIL S.A., was duly registered at the General Inspection of Justice on the first day of June, Year one thousand nine hundred and ninety nine, under registration number seven thousand five hundred and ninety one, at the Fifth Book of Joint-Stock Companies. According to the information system, the company subject of this certificate **is currently in good standing**. This certificate is issued upon request of the interested party and in order to be submitted to the STATE OF FLORIDA, UNITED STATES OF AMERICA, regardless the enforceability of annual taxes that might be due. Buenos Aires, signed and executed on the above mentioned date. -----

Digitally signed by: Mariano CORONADO. -----

Date: 08.05.2019 at 04:26:48 PM. -----

Location: Autonomous City of Buenos Aires. -----

Mariano Coronado -----

Coordinator -----

Administrative Department -----

General Inspection of Justice -----

[Footnote] Digitally signed by: Electronic Documents Management – GDE -----

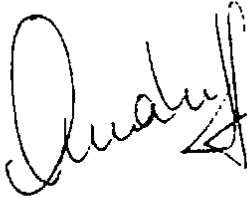
DN: cn= Electronic Documents Management - GDE, c= AR, o= Administrative Modernization Secretariat of Government, Serial Number= CUIT 30715117564 --

Date: 08.05.2019 - 4:26:50 -03'00' -----

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This is a TRUE TRANSLATION into English of the original document in Spanish, which I had before me and which I annex hereto. Buenos Aires, 15th August 2019. -----  
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[There follows text in Spanish for legalization purposes at the Certified Translators' Association of the Autonomous City of Buenos Aires ("Colegio de Traductores Públicos de la Ciudad Autónoma de Buenos Aires") -----

ES TRADUCCION FIEL al inglés del documento original, en idioma español, que he tenido a la vista y que anexo a la presente, en Buenos Aires a los 15 días del mes de Agosto de 2019. -----



ANA MARIA HECKMANN -----  
English-Spanish Certified Translator -----  
License N°: Book XII – Page 414 – Registration Number at the Certified Translators' Association of the Autonomous City of Buenos Aires ("Colegio de Traductores Públicos de la Ciudad Autónoma de Buenos Aires"): 4102 -----

TRADUCCION FIEL  
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