

**L0200 0013192**

**Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)205-0393

**From:**

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

**LIMITED LIABILITY COMPANY  
BEST WEB PROMO, L.L.C.**

Certificate of Status	0
Certified Copy	1
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DIVISION OF CORPORATION

**TB**

**ARTICLES OF ORGANIZATION**  
**FOR**

**Best Web Promo, L.L.C.**

**ARTICLE I - NAME**

The name of the Limited Liability Company is:

Best Web Promo, L.L.C.

**ARTICLE II - ADDRESS**

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

2999 NE 191 Street, Suite 404  
Aventura, FL 33180

**ARTICLE III - REGISTERED AGENT / REGISTERED OFFICE**

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

Katja Kukovic  
2999 NE 191 Street, Suite 404  
Aventura, FL 33180

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 608, F.S.

Signature



In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signature

  
Katja Kukovic - Member

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AND  
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