

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.

(((H080001026073)))



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)617-6383

From:

: JOSEPH M. BALOCCO, P.A. Account Name

Account Number : I20000000147 Phone : (954)764-0005

Fax Number

; (954)764-1478

## ORIDA/FOREIGN LIMITED LIABILITY CO.

### Best Asset Management LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

D. BRUCE

APR 21 2008

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

# ARTICLES OF ORGANIZATION OF BEST ASSET MANAGEMENT LLC

#### ARTICLE ! - NAME:

The name of the Limited Liability Company is: Best Asset Management LLC.

#### ARTICLE II - ADDRESS:

The mailing address and the street address of the principal office of the Limited Liability Company is 3511 NE 22<sup>nd</sup> Avenue, Suite 350, Fort Lauderdale, Florida 33308.

#### **ARTICLE III - DURATION:**

The period of duration for the Limited Liability Company shall be perpetual.

#### **ARTICLE IV- MANAGEMENT:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

≥ ∽

<u>Name</u>

<u>Address</u>

Arvid Albanese

3511 NE 22<sup>nd</sup> Avenue, Suite 350 Fort Lauderdale, Florida 33308

#### ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be conditioned upon the unanimous consent of the members.

#### ARTICLE VI - MEMBERS' RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Ilmited liability company shall be conditioned upon the unanimous consent of the remaining members.

08 APR 21 PH 12: 50

IN WITNESS WHEREOF, I have eigned these Articles of Organization and acknowledged them to be my act this 18 day of April, 2008.

Signature of a member or an authorized representative of a member

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

Arvid Albanese
Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Best Asset Management LLC
- 2. The name and the Florida street address of the registered agent are:

Arvid Albanese 3511 NE 22<sup>nd</sup> Avenue, Suite 350 Fort Lauderdale, Florida 33308

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 auties, and I am familiar with and accept the obligations of my position as registered agent.

Signature - Registered Agent

2

1080001026073