

L14 000185117

*** Effective Date

Florida Department of State January 1, 2015

Division of Corporations
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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : COURT ACCESS CENTERS OF AMERICA
Account Number : 075350000541
Phone : (813) 875-1333
Fax Number : (813) 200-1050****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****Email Address: Haymann3@aol.com**FLORIDA LIMITED LIABILITY CO.
Best Community Management LLC**

Certificate of Status	1
Certified Copy	0
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Audit # H14000278755
**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

Best Community Management LLC

The mailing address and street address of the Limited Liability Company are:

**3173 S.W. Hambrick St.
Port St. Lucie, FL 34953**

ARTICLE II

Term of Existence

This Limited Liability Company shall have perpetual existence, commencing on January 1, 2015.

ARTICLE III

Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618, 813-875-1333.

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ARTICLE V
Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

**3173 S.W. Hambrick St.
Port St. Lucie, FL 34953**

and the name of its registered agent at such address is:

Diana Mann

ARTICLE VI
Effective Date

The effective date of this Limited Liability Company shall be January 1, 2015.

ARTICLE VII
Management


The name and address of each person authorized to manage and control the Limited Liability Company:

Name and Address

**Diana Mann, Authorized Member
3173 S.W. Hambrick St.
Port St. Lucie, FL 34953**

**Melanie Edwards, Authorized Member
10307 S. Indian River Drive
Fort Pierce, FL 34982**

Dated: Wednesday, December 03, 2014

DocuSigned by:

Diana Mann

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ACCEPTANCE BY REGISTERED AGENT

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.

Date: December 3, 2014

DocuSigned by:
Diana Mann
4B6C963F28E4418
Diana Mann

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