## Florida Department of State

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Division of Corporations

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From:

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Account Number : I19980000080 Phone : (305)538-2344

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## Foreign Limited Liability Company Best Apps, LLC

Certificate of Status	1
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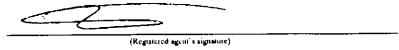
# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPHANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOILOWING IS SUBMITTED TO REGISTER A FOREIGN. DIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavadable, enter alternate in	ime adopted for the purpose of transacting business in Flor	rida. The alternate na	me must include "Limited Liability Comp	ary;" "L.L.C," or "I.J.C	
Delaware		81-19 3	68071		
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	J	(FEI number, if applic	cable)	
	(Date first transacted business in Florida, if prior to (See sections 605,0901 & 605,0905, F.S. to determine	registration ) inc penalty hability)	<u> </u>		
c/o Doug Bowen		c/o De 6			
(Street Address of b	rincipal Office)	U	(Mailing Address)		
3737 Collins Avenue, I	Y S-1304	3737 (	Collins Avenue, # S-1304		
Miami Beach, FL 33140		Miumi Beach, FL 33140			
Name and street address	is of Florida registered agent: (P.O. Box	NOT accepts	sble)		
Name:	Richard L. Steinberg, Esq.				
Office Address:	767 Arthur Godfrey Road		-		
	Miami Beach		33140-3413 . Florida		
	(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.



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8.	For initial indexing purposes,	list names,	title or capacity	and addresses of the	primary men	nbers/managers or p	ersons authorized to
ma	nage [up to six (6) total]:						

Title or Capacity:	Name and Address: Name: Michael Bowen	Title or Capacity:	Name and Address:  Douglas Bowen  Name:		
Member	Address: 3737 Collins Avenue, # S-1304		Address: 3737 Collins Avenue, # S-1304		
■Authorized  Person  President	Miami Beach , FL 33140	■ Authorized  Person  Secretary	Miami Beach , FL 33140  Other  Treasurer		
□Manager	Name:	Manager	Name:		
Member	Address:	☐ Member	Address:		
☐Authorized		☐ Authorized Person			
Other	Other	Other	(A ~~		
Manager	Name:	☐ Manager	Name:		
Member	Address:	Member	Address:		
☐Authorized Person		☐ Authorized Person			
Other	Other	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.

Dogle Jora.		
	Signature of an authorized person	
	Douglas Bowen	
	Typed or printed name of supace	<del></del>

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BEST APPS, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE THIRTY-FIRST DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEST APPS, LLC"
WAS FORMED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

6723865 8300
SR# 20195030616
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202934305

Date: 05-31-19