

**ARIZONA CORPORATION COMMISSION  
CORPORATIONS DIVISION  
SUBMISSION COVER SHEET**

THIS DOCUMENT SUBJECT TO PUBLIC RECORD - Important: use a separate cover sheet for each document

Regarding (Name/proposed name for Corp./LLC): RPM Insurance Agency LLC L11702939

Please Check or Complete the Appropriate Sections:

- A. 1. ☒ NEW Entity Filing    ☐ CHANGE to Existing Entity    ☐ Resubmission/Corrected Document
2. ☒ Domestic (from Arizona)    ☐ Foreign (organized in another state or country)
3. ☐ Profit/Business Corporation (B)    ☐ Nonprofit Corporation (NP)    ☒ LLC    ☐ Trust    ☐ Other
4. Payment    ☐ Check # \_\_\_\_\_    ☐ Cash    ☐ MOD account # \_\_\_\_\_  
Amount: \$ \_\_\_\_\_    ☐ No fee required    ☐ See attached distribution of funds instructions
5. Processing    ☒ Expedited (Priority service, \$35 Additional Fee Per Document)  
                            ☐ Regular (usually 2-4 months)

B. Filing Type: (Check one only)

- ☐ Articles of Domestication  
☐ Articles of Incorporation  
☐ Articles of Organization  
☐ Application to Transact Business (NP)  
☐ Application to Conduct Affairs (NP)  
☐ Application for New Authority  
☐ Application for Registration  
☐ Articles of Amendment  
☐ Articles of Amendment & Restatement

- ☐ Publication of \_\_\_\_\_  
☐ Articles of Correction  
☐ Merger of (name): \_\_\_\_\_  
Into: \_\_\_\_\_  
☐ Other: \_\_\_\_\_

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FEB 18 2005  
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CORPORATIONS DIVISION**

C. Special Instructions: \_\_\_\_\_

D. Extras:

- ☐ Certified Copies- \_\_\_\_\_ (Qty. @ \$5 ea. for corps or \$10 ea. for LLCs)    ☐ Expedite Certified Copies (\$35 extra)  
☐ Good Standing Certificate- \_\_\_\_\_ (Qty. @ \$10 ea.)    ☐ Expedite Good Standing (\$35 extra)

E. RETURN DELIVERY VIA: ☐ Mail or ☐ Pick Up or ☐ Fax # ( \_\_\_\_\_ )

The following individual should be called to pick up completed documents:

Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

Pick-up by: \_\_\_\_\_ Date: \_\_\_\_\_

Please respond promptly to phone messages. Documents will be mailed if they are not picked up in a timely manner - approximately two weeks. In that event, the documents should be mailed to the following address:

Name: \_\_\_\_\_ Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_



DO NOT PUBLISH THIS SECTION

AZ CORPORATION COMMISSION

FILED

"EXP"

## ARTICLE 1

The company name must contain an ending which may be "limited liability company," "limited company," or the abbreviations "L.L.C.", "L.C.", "LLC" or "LC". If you are the holder or assignee of a tradename or trademark, attach Declaration of Tradename Holder form.

FEB 18 2005

FILE NO. 411702939

## ARTICLES OF ORGANIZATION

A.R.S. §29-632

## ARTICLE 2

May be in care of the statutory agent.

1. Name. The name of the limited liability company is:

RPM Insurance Agency LLC

2. Known Place of Business. The address of the company's known place of business in Arizona is:

8346 W. Washington St.

Peoria, AZ 85345

## ARTICLE 3

The statutory agent must provide a street address. If statutory agent has P.O. Box, then they must also provide a street address/location. The agent must sign the Articles or provide a consent to acceptance of appointment.

3. Statutory Agent. (In Arizona) The name and street address of the statutory agent of the company is:

Leigh Strickman, E.A.

10327 W. Coggins Drive, Suite 2

Sun City, AZ 85351

## Acceptance of Appointment By Statutory Agent

I Leigh Strickman, E.A., having been designated to act as  
(Printed Name)

Statutory Agent, hereby consent to act in that capacity until removed or resignation is submitted in accordance with the Arizona Revised Statutes.

The agent must consent to the appointment by executing the consent.

[Signature]  
Signature of Statutory Agent

Accurate - Leigh Done

[If signing on behalf of a company serving as statutory agent, print company name here]

## ARTICLES 4

Complete this section only if you desire to select a date or occurrence when the company will dissolve. If perpetual duration is desired, leave this section blank.

4. Dissolution. The latest date, if any, on which the limited liability company must dissolve is:



935534  
PAID  
86 # 1003  
2/24/05

DO NOT PUBLISH THIS SECTION

ARTICLE 5

Check which management structure will be applicable to your company. Provide name, title and address for each person.

5. Management.

☐

Management of the limited liability company is **vested in a manager or managers.** The names and addresses of each person who is a manager ~~AND~~ each member who owns a twenty percent or greater interest in the capital or profits of the limited liability company are:

L11702939

Name: \_\_\_\_\_

[ ] member [ ] manager

[ ] member [ ] manager

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name: \_\_\_\_\_

[ ] member [ ] manager

[ ] member [ ] manager

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

☒

Management of the limited liability company is **reserved to the members.** The names and addresses of each person who is a member are:

Michael Patino

Name: \_\_\_\_\_

[X] member

[ ] member

Address: 8346 W. Washington St.

City, State, Zip: Peoria, AZ 85345

Name: \_\_\_\_\_

[ ] member

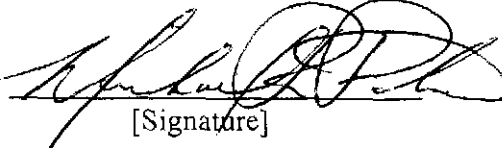
[ ] member

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

The person(s) executing this document need not be manager or member(s) of the company.

EXECUTED this 29<sup>th</sup> day of December, 2004.



[Signature]

[Signature]

Michael Patino

[Print Name Here]

[Print Name Here]

Your fax and phone number is optional.

PHONE \_\_\_\_\_

FAX (623) 776-2787

**COMMISSIONERS**  
MARC SPITZER - Chairman  
WILLIAM A. MUNDELL  
JEFF HATCH-MILLER  
MIKE GLEASON  
KRISTIN K. MAYES



**ARIZONA CORPORATION COMMISSION**

**BRIAN C. MCNEIL**  
Executive Secretary  
  
**DAVID RABER**  
Director, Corporations Division

**RPM INSURANCE AGENCY**  
**MICHAEL PATINO**  
**8346 W WASHINGTON ST, STE 1**

**PEORIA AZ 85345-**

**Effective Date: 12/17/2004**  
**File No: N-1170293-9**

**You have reserved the name of:**  
**RPM INSURANCE AGENCY**

**Name Reservation is granted for a period not to exceed one hundred and twenty(120) days and may not be reserved again.**  
**This name reservation was received on 12/17/2004 and will expire on 04/17/2005 (A.R.S. SECTION 10-402).**

**AMOUNT RECEIVED \$10.00**

**RECEIPT No. 58770**

**CF: 0012**  
**REV. 01/1996**