



01163753

DO NOT PUBLISH THIS SECTION**ARTICLE 1**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.

ARTICLE 2

May be in care of the statutory agent.

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.

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

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.

AZ CORPORATION COMMISSION

FILED

EXP

MAR 23 2005

ARTICLES OF ORGANIZATIONFILE NO. L4190262-1

A.R.S. §29-632

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

QIGODDESS LLC

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

2855 E. BROWN RD STE. 20
MESA AZ 85213

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

MINDY HAYDEN
3840 S. CUPERTINO DR
GILBERT AZ 85297
Acceptance of Appointment By Statutory Agent

\$ PAID
YS CO
 # 1135

I MINDY HAYDEN, 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.

Signature of Statutory Agent

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

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

PERPETUAL

DO NOT PUBLISH THIS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.

L-1190262-1



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:

Name:

MINDY HAYDEN

☐ member ☒ manager

☐ member ☐ manager

Address:

3840 S. CUPERTINO DR

City, State, Zip:

GILBERT AZ 85297

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:

Name:

☐ member

☐ member

Address:

City, State, Zip:

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 19TH day of MARCH, ____.

Mindy Hayden

[Signature]

[Signature]

MINDY HAYDEN

[Print Name Here]

[Print Name Here]

PHONE (480) 634-8002

FAX (888) 909-7620

Your fax and phone
number is optional.