

DO NOT PUBLISH THIS  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 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

AUG 04 2005

"EXP"

FILE NO.                      ARTICLES OF ORGANIZATION

L-1220138-2

A.R.S. §29-632

1. Name. The name of the limited liability company is:  
DESERT OASIS Patrick Properties LLC
2. Known Place of Business. The address of the company's known place of business in Arizona is:  
8517 W. ALEX AVENUE  
PEORIA, AZ 85382
3. Statutory Agent. (In Arizona) The name and street address of the statutory agent of the company is:  
WILLIAM L. OWENS  
2224 W. Northern Ave STE D-207  
PHOENIX, AZ 85021

Acceptance of Appointment By Statutory Agent

I WILLIAM L. OWENS, 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.

William Owens  
Signature of Statutory Agent

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

TYPE OF SERVICE: PROPERTY MANAGEMENT

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

N/A

AZ CORPORATION COMMISSION  
FILED

"EXP" SEP 19 2005

FILE NO. L-1220138-2

1090820

AZ Corp. Commission



01338100

**\$ PAID**

85 #EL311  
1058730 8/10/05

No 9  
9/23/05

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

L-1220/382

☐ 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:

**Names:**

☐ 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:

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

GARY PATRICK

**kkmember**

**[ ] member**

**Address:**

8517 W. ALEX AVENUE

City, State, Zip:

PEORIA, AZ 85382

**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 1st day of AUGUST, 2005

Marcy Patrick  
[Signature]

**[Signature]**

**Your fax and phone number is optional.**

**GARY PATRICK**

[Print Name Here]

**[Print Name Here]**

**PHONE**

FAX

# Owens & Bondell PLLC

## Certified Public Accountants

---

2224 W. NORTHERN AVE. • SUITE D-207 • PHOENIX, ARIZONA 85021

PHONE (602) 995-0081 • FAX (602) 995-0082

owensbondellcpas.com • wlowens@owensbondellcpas.com

September 15, 2005

Arizona Corporation Commission  
1300 W. Washington  
Phoenix, AZ 85007-2929

Dear Sir or Madam,

Please find enclosed the corrected application for Articles of Organization for Desert Oasis Patrick Properties (L-1220138-2).

Please also find enclosed the change of address form for the statutory agent for Desert Oasis Family Dentistry (P-1220400-8).

Sincerely,



Bill Owens, Associate  
Owens & Bondell PLLC  
Certified Public Accountants

Enclosure

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



**ARIZONA CORPORATION COMMISSION**

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

**DESERT OASIS PROPERTIES, LLC**  
**WILLIAM L OWENS**  
**PO BOX 37469**

**PHOENIX**

**AZ 85069-**

**Effective Date: 08/15/2005**

**File No: L-1220138-2**

**We are returning the enclosed document regarding the above-referenced Corporation/Limited Liability Company for the following reasons:**

**Note: Domestic Limited Liability Companies must return the corrected document within twenty (20) days of the rejection date to retain the original file date.**

**The filing fee has been deposited.**

**One or more descriptive words must be added to your name to make it distinguishable from pre-existing names. To check the availability of a corporate name you can visit our website at [www.cc.state.az.us/corp/filings/forms/namesrch.htm](http://www.cc.state.az.us/corp/filings/forms/namesrch.htm)**

**The Statutory Agent must have an Arizona street address. If the statutory agent has a P.O. Box, then they must also provide a physical description of their street address/location. A statutory agent may be either an individual Arizona resident, a domestic corporation or limited liability company, or foreign corporation or limited liability company authorized to transact business in Arizona.**

**If you have any questions, please feel free to give us a call at (602) 542-3135, or Arizona residents (only) may use the toll free number (800) 345-5819. You may also contact our Tucson location at (520) 628-6560.**

**\*\*\*\*\* IMPORTANT \*\*\*\*\***

**To successfully process your document, it is imperative you return:**

- 1) A copy of this letter,**
- 2) Any changes which accompanied this letter (corrections made),**
- 3) Any filings fees.**

**FIL: 001**  
**REV. 05/2005**

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): DESERT OASIS Patrick Properties LLC

L-12201382

Please Check or Complete the Appropriate Sections:

- A. 1. ☒ NEW Entity Filing ☐ CHANGE to Existing Entity ☐ Re submission/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 # X 1311 ☐ Cash ☐ MOD account # \_\_\_\_\_  
Amount: \$ 85.00 ☐ No fee required ☐ See attached distribution of funds instructions
5. Processing ☒ Expedited (Priority service, \$35 Additional Fee Per Document)  
Completed as soon as possible or visit [www.cc.state.az.us/corp](http://www.cc.state.az.us/corp) for current processing times.  
☐ Regular Visit [www.cc.state.az.us/corp](http://www.cc.state.az.us/corp) for current processing times.

B. Filing Type: (Check one only)

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

RECEIVED

AUG 04 2005

ARIZONA CORP COMMISSION  
CORPORATIONS DIVISION

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

RECEIVED

SEP 19 2005

Into: \_\_\_\_\_

Other: \_\_\_\_\_

ARIZONA CORP COMMISSION  
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: WILLIAM L. OWENS

Firm: OWENS & BONDELL PLLC

Address: P.O. BOX 37469

City, State, Zip: PHOENIX, AZ 85069

Phone: (602) 995-0081

CFCVLR  
REV 04/05