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Phil Salmon, AZCLDP # 80653

Salmon & Associates Business Consulting, AZCLDP # 80652

DO NOT PUBLISH THIS SECTION

AZ CORPORATION COMMISSION
FILED

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 trademark or trademark, attach Declaration of Trademark Holder form.

AUG 24 2006

ARTICLES OF ORGANIZATION

FILE NO. P-1307649-0 A.R.S. §29-632

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

Martina J. Sullivan, PLLC

ARTICLE 2

May be in care of the statutory agent.

2. Known Place of Business. The address of the company's known place of business in Arizona is: P.O. Box 7273

Goodyear, AZ 85338

3. ☒ Purpose. The sole purpose of the Professional Limited Liability Company is to render professional real estate, cemetery or membership-camping services only.

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.

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

Allan
Alan Hutchison, CPA11811 N. Tatum Blvd, Ste. P-199Phoenix AZ 85028

Acceptance of Appointment By Statutory Agent

I Allan
Alan Hutchison, CPA, 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 of Statutory Agent

[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.

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

N/A

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SECTION
ARTICLE 5
Check which management
structure will be applicable to
your company. Provide
name, title and address for
each person.

6. Management.

P-1307649-0

☐ 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: ☐ 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:

Martina J. Sullivan

Name: ☒ member ☐ member

Address: P.O. Box 7273

City, State, Zip: Goodyear, AZ 85338

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 24th day of August, 2006

Martina J. Sullivan
[Signature]

[Signature]

Your fax and phone
number is optional.

Martina J. Sullivan

[Print Name Here]

[Print Name Here]

PHONE _____

FAX _____

LL-0004
Rev. 09/04

See A.R.S. §29-601 et seq. for more info.