

AZ CORPORATION COMMISSION **FILED**

DEC 0 3 2007

14122913

DO NOT WRITE ABOVE THIS LINE, FOR ACC USE ONLY

ARTICLES OF ORGANIZATION

	AKTIOLL	S OF ORGANIZATION			
DO NOT PUBLISH	Select one. This form may be used for: X ARIZONA LIMITED LIABILITY COMPANY (A.R.S. §29-632)				
THIS SECTION NOTE: A professional limited liability	ARIZONA PROFESSIONAL LIMITED LIABILITY COMPANY (A.R.S. §29-841.01)				
company is an LLC organized for the purpose of rendering one or more categories	1. The name of the orga	anization:			
of professional service. Professional service is defined as a service that may be lawfully	A. 417460 LLC Name Reservation File N	umber (If one has been obtained). If not, leav	e this line blank		
rendered <u>only</u> by a person licensed in this state to render the	B. nicola imports L.L.C.				
service.	Limited Liability Company Name				
1. The LLC name must contain the words "limited liability company or "limited company" or the abbreviations "L.L.C.",	2. Known place of business in Arizona (If address is the same as the street address of the statutory agent, write "same as statutory agent". DO NOT LEAVE THIS SECTION BLANK)				
"L.C.", "LLC", or "LC". The Professional LLC name must contain the	Address 6438 E. Vernon Ave		·····		
words "professional limited flability company or the abbreviations	City Scottsdale	State Arizona	Zip_ 85257		
"P.L.C.", "P.L.C.", "PLLC", or "PLC."	3. The name and street address of the statutory agent in Arizona				
2. Must be an Arizona address. DO NOT LEAVE THIS SECTION BLANK	Name Nick Bramini				
3. If the statutory	Address 6438 E. Vernon Ave				
agent has a PO BOX then they must also provide a physical	City Scottsdale	State Arizona	Zip_85257		
address or description of the location. The agent <u>must</u> sign the articles or provide written consent to acceptance of the appointment.	Acceptance of Appointment by Statutory Agent: Nick Bramini				
11:0004	If sig	ning on behalf of a company, please prin	it the company name here.		

Rev: 10/2006

LL:0004

DO NOT PUBLISH THIS SECTION

- 4. Only required for professional limited liability company. The purpose must state the professional service or services that the company is organized to perform. Professional service is defined as a service that may be lawfully rendered only by a person licensed in this state to render the service.
- 5. The latest date, if any, on which the Company must dissolve. If a dissolution date should include the month, day and year. Perpetual means continuing forever or indefinitely
- Check which management structure will be applicable to your company. Provide name, title and address for each person.
- 6A. If reserved to the member(s), check the member's box and provide the name(s) and address(es) of each member. NOTE: if reserved to the member(s) you cannot list any manager.
- 6B. If vested in manager(s) check the manager's box and provide the name(s) and address(es) of each manager and each member who owns a twenty (20%) percent or greater interest in the capital or profits of the LLC/PLLC.

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

Your phone and fax are optional.

LL:0004 Rev: 10/2006

 Purpose of this (Professional) Limite following (professional) service(s): (Onl 	
5. Dissolution: The latest date of Dissolution	ution
The latest date to dissolve/_/	(Please enter month, day and four digit year)
☑The Limited Liability Company is Perpe	tual
6. Management Structure: (Check one box	x only) A.R.S. §29-632(5)
A. RESERVED TO THE MEM	BER(S)
B. UESTED IN MANAGER(S)	ECT ONLY THE MEMBER BOX FOR EACH MEMBER LISTED.
IF VESTED IN THE MANAGER(S), AT LEAST ONE EN	NTRY BELOW MUST HAVE THE MANAGER BOX CHECKED.
Name Nick Bramini	Name
Member Manager (only if "B" is selected above)	Member Manager (only if "B" is selected above)
Address:6438 E. Vernon Ave,	Address:
City, Scottsdale State, Arizona Zip: 85257	City, State, Zip:
Name	Name
Member Manager (only if "B" is selected above)	Member Manager (only if "B" is selected above)
Address:	Address:
City, State, Zip:	City State, Zip:
	ASE ATTACH THE ADDITIONAL PAGE TO THE ARTICLES OF ORGANIZATION.
Executed this 21 day of 1	November, 2007
Executed by:	Print Name Mark Williams, A.V.P.
	Business Filings Incorporated
If signing on behalf of a company,	please print the company name here.
Phone Number: 800-981-7183	Fax Number: 608-827-5501

SEC OF STATE 1700N MASHINGTON PHX. AZ: 85007

11/02/2007 10:01AM **** 000004#9084 LILY

P000256

TRADE NAME \$10.00
P000203

EXPEDITE SERVICE \$25.00 SUBTOTAL \$35.00

TU #3E 00

CHECK \$35.00

all Registration to:

of State Jan Brewer / Trade Name Division it Washington 7th Fl. Phoenix, Arizona 85007 ervice: 14 N. 18th Ave., Phoenix, Arizona

ffice: 400 W. Congress, Ste. 252

My Commission Expires November 1, 2008

-6187

-5842 (within Arizona) e; \$10.00 SECRETARY OF STREET

2887 NOV -2 AM '9: 56

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APPLICATION FOR REGISTRATION OF TRADE NAME (A.R.S. §44-1460)

The Registration of Trade Names and Trademarks is not legally required in Arizona, but is an accepted business practice. This is a registration for an Arizona Trade Name only in accordance with A.R.S. §44-1480. The registration of a trade name is a public record and does not constitute exclusive rights to the holder of the name. Names with a corporate ending (e.g., inc., LLC or Ltd.) are not acceptable.

blezse clearly brint or type your applicant)		
Name, title or designation to be registered: NICOLA IMPORT	<u> </u>		
Name of Applicant(s): NICK A. BRAMINI (If more than 1 applicant, an "or" design			
Your certificate and renewal notices are dependent aulte numbers. Remember to update your registration	on accurate address info if you move.	rmation including	
- A LIVER RASE & VEDNON AVE	SCOTTSDALE ARIZO		hana kana
Business Address: 6438 €. VERNON AVE Street or Box Number	City State	72007 10 9 HI 00	JUUC# #3US# * : *: V
Phone (Optional): 602 405 2055			* LILY
Applicant must check one. Do not select "Corpora	ition" or "LLC" if you	P000256 are notRê0FeMUE P000203	\$10.08
incorporated, or your application will be returned to yo	น.		ERVICE \$25.00
B-andad		SUBTOTAL	\$35.00
Individual Foreign corporation licensed Partnership	nization	CHECK	\$35.00
The date in which the name, title or designation was first unmust be today's date or prior to today's date: Month	Day Year		
General nature of business conducted: SALES AND IMPORTS	S		
	NA C		
NICK A. BRAMINI Applicant's Printed Name	pplicant's Signature		
Applicant's Printed Name	opplicant's Signature		
State of Arizona County of MARICOPA	- 0		
Acknowledged before me on thisday of	Metalinus ~	, 20 <u>0</u> 5	
KATE JACKSON NOTARY PUBLIC - ARIZONA MARICOPA COUNTY	Notary Public		

STATE OF ARIZONA

Department of State

TRADE NAME CERTIFICATION

NICOLA IMPORTS

I, Janice K. Brewer, Secretary of State, do hereby certify that in accordance with the Trade Name Application filed in this Office, the Trade Name herein certified has been duly registered pursuant to Section 44-1460, Arizona Revised Statutes, in behalf of:

NICK A. BRAMINI 6438 E. VERNON AVE SCOTTSDALE AZ 85257-

11/2/2007 Application



Registration Date: 11/02/2007

Expiration Date: 11/2/2012

Date First Used: 11/1/2007

Trade Name No.: 417460

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Arizona. Done at Phoenix, the capitol,

this 2 day of November, 2007.

Ancie K. Brewer

JANICE K. BREWER