FEB 1 9 2009

AMENDED AND RESTATED
ARTICLES OF ORGANIZATION
OF

FILE NO. <u>L-150015</u>4-0

REHNU, LLC

I. NAME

The name of the limited liability company is REhnu, LLC (the "Company").

II. ADDRESS OF KNOWN PLACE OF BUSINESS; STATUTORY AGENT

The address of the known place of business of the Company is 2730 E 9th, Tucson, AZ 85716, and the name and address of the initial statutory agent of the Company for service of process on the Company are Lawrence M. Hecker, 405 W. Franklin Street, Tucson, Arizona 85701.

III. TERM

The term of the Company shall be perpetual.

IV. MANAGEMENT

Management of the Company is vested in a Manager.

V. NAME AND ADDRESS OF MANAGER; 20 PERCENT MEMBER

The name and address of the Manager of the Company at the time of its formation is:

J. Roger Angel 2730 E 9th Tucson, AZ 85716

The name and address of the sole Member who owns a twenty percent (20%) or greater interest in the capital or profits of the Company is:

J. Roger Angel 2730 E 9th Tucson, AZ 85716

IN WITNESS WHEREOF, for the purpose of amending and restating the Articles of Organization of the Company pursuant to ARS §29-633, I, the undersigned Manager, have executed these Amended and Restated Articles of Organization this 19th day of February, 2009

J. Roger Augel

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION SUBMISSION COVER SHEET

	portant: <u>USE A SEPARATE COVER</u> sheet for each document. e you filing:	to e	existing Entity Re submission/Correction
	ase Select AND Complete all the Appropriate Sections 1 garding (Name/Proposed name for Corp/LLC):	thr	ough 10:
1.	Type in Name: REHNU, LLC		
2.	Filing Type: (Select Only One) Articles of Domestication	4 . 5 .	✓ Check Amt 60.00 Check # 6479 Cash Amt MOD #
3.	Extras:		No fee required
	Certified Copies () (Qty @ \$5 each for Corps Certified Copies () (Qty @ \$10 each for LLC's Good Standing Certificate () (Qty @ \$10 ea.) Expedite Good Standing (\$35.00 extra) Expedite Certified Copies (\$35.00 extra)	6.	See attached distribution of funds instructions Total Payment Type: \$ 60.00
7.	Other Special Instructions:		14 S
8.	SELECT ONE RETURN DELIVERY OPTION : Mail Pick Up Fax #		eted documents:
9.	The following individual should be called to pick up co	mple	eted documents:
	Pick-up by: (FOR ACC USE ONLY. Do not fill in this box)		Date:
			The state of the s
	Name/Service Co.		hone:
10.	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		
	Firm Name: Hecker and Muchlebach, PLLC	Δ	attn: JoAnn Stoltz
	Address: 405 W. Franklin Street	<u> </u>	
	City, State, Zip: Tucson AZ 85701		