



AFFIDAVIT OF PUBLICATION

for Arizona Corporation Commission

Arizona Daily Sun
1751 S. Thompson Flagstaff, AZ 86001
Ph: 928-774-4545 Fx: 928-773-1934

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MANGUM, WALL, STOOPS
& WARDEN

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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

STATE OF ARIZONA

COUNTY OF Cocconino

I Bobbie Crosby (NAME OF PERSON
AUTHORIZED TO SIGN ON BEHALF OF THE NEWSPAPER), am authorized by the publisher as
agent to make this affidavit of publication. Under oath, I state that the following is true and correct.

The Arizona Daily Sun (NAME OF THE NEWSPAPER),
is a newspaper which is published [check one of the following] daily ☒, weekly ☐, bi-weekly ☐ is of
general circulation and is in compliance with Arizona Revised Statutes ' ' 10-140.34 & 39-201.A & B.
The notice will be/has been published three (3) consecutive times in the newspaper listed above.

DATES OF PUBLICATION:

- 1) June 15 2009
- 2) June 16 2009
- 3) June 17 2009

THE NAME OF THE CORPORATION: Heal Properties LLC

CORPORATE FILE NUMBER: L-1529051-6

Note: This number is found on the top right corner of the Commission approved document

TYPE OF DOCUMENT: Articles of Organization

*Example: Merger between party a and party b; name change from/to; foreign authority with a fictitious name;
articles of incorporation; application for authority; articles of organization; amendment; etc.*

AUTHORIZED SIGNATURE:

Title Legal Rep

SUBSCRIBED AND SWORN TO BEFORE ME ON THE

25 DAY OF June, 2009

NOTARY SIGNATURE:

Stephen L. Kuyper

Please don't attach a newsprint clip of the published notice.

However, you may attach a duplicate of the notice copied (not pasted) onto letter-size paper.

Legal No. 11696

NOTICE (for publication)

ARTICLES OF ORGANIZATION
HAVE BEEN FILED IN THE OF-
FICE OF THE ARIZONA CORPO-
RATION COMMISSION FOR
I Name: HEAL PROPERTIES, LLC
L-1529051-6

II The address of the known place
of business is: 8050 U.S. Naval Ob-
servatory Road, Flagstaff, AZ
86001

III The name and street address of
the Statutory Agent is: Helen Heal
8050 U.S. Naval Observatory Road,
Flagstaff, AZ 86001

B: [x] Management of the limited lia-
bility company is reserved to the
members. The names and address-
es of each person who is a member
are: James A. Heal and Helen J.
Heal, Co-Trustees of The James A.
Heal and Helen J. Heal Revocable
Living Trust dated May 15, 1984
8050 U.S. Naval Observatory Road,
Flagstaff, AZ 86001 [x]member
PUB: June 15, 16, 17, 2009 11696

**ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION COVER SHEET**

7-6-09

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

ARE YOU FILING: ☐ New Entity ☒ Change to existing entity ☐ Re-submission/Correction

PLEASE COMPLETE ALL APPROPRIATE SECTIONS

Type in Corp/LLC Name: Heal Properties, LLC

FILING TYPE	REGULAR SERVICE FEE	EXPEDITED SERVICE FEE
<input type="checkbox"/> Articles of Domestication	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$135.00
<input type="checkbox"/> Articles of Incorporation (Profit)	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$ 95.00
<input type="checkbox"/> Articles of Incorporation (Non Profit)	<input type="checkbox"/> \$ 40.00	<input type="checkbox"/> \$ 75.00
<input type="checkbox"/> Articles of Organization (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input type="checkbox"/> \$ 85.00
<input type="checkbox"/> Application For Authority (Business)	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application to Conduct Affairs (Non Profit)	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application for New Authority	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application for Registration	<input type="checkbox"/> \$150.00	<input type="checkbox"/> \$185.00
<input type="checkbox"/> Articles of Amendment	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Amendment & Restatement	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Correction	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Merger/Share Exchange	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$135.00
<input type="checkbox"/> Articles of Merger (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input type="checkbox"/> \$ 85.00
<input checked="" type="checkbox"/> Affidavit of Publication	<input checked="" type="checkbox"/> \$ 0.00	<input type="checkbox"/> \$ 35.00
<input type="checkbox"/> CORPORATIONS -Certified Copies* <small>*If copies are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$5.00 Each () (Enter Quantity)	<input type="checkbox"/> \$40.00 () (Enter Quantity)
<input type="checkbox"/> LLCs - Certified Copies* <small>*If copies are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$10.00 Each () (Enter Quantity)	<input type="checkbox"/> \$45.00 () (Enter Quantity)
<input type="checkbox"/> Good Standing Certificate* <small>*If Good Standing Certificates are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$10.00 Each () (Enter Quantity)	<input type="checkbox"/> \$45.00 () (Enter Quantity)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Regular Fee	<input type="checkbox"/> Expedite Fee

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SELECT PAYMENT TYPE:

DO NOT WRITE YOUR CREDIT CARD NUMBER ON THIS FORM!

☐ Check Check # _____ Check Amount \$ _____

☐ M.O.D. Account MOD Acct # _____ Mod Amount \$ _____

☐ Cash Cash Amount \$ _____

☐ Credit Card -- for in-person filings only CC Amount \$ _____

☐ No fee required

SELECT ONE RETURN DELIVERY OPTION: ☐ Mail ☐ Pick Up ☐ Fax # ()

REQUIRED: Please list the person or company who will be picking up the completed documents.

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY TWO WEEKS).

Person or Company Name:

Phone Number:

Kathy Munro; Mangum, Wall, Stoops & Warden

928-779-6951

Address:

100 N. Elden

City:

Flagstaff

State:

AZ

Zip:

86001

PICK-UP BY: _____

FOR ARIZONA CORPORATION COMMISSION USE ONLY

DATE: _____

View current process times at: www.azcc.gov/Divisions/Corporations