AZ	CORPORATION COMMISSION	
	FILED	

AUG 1 4 2012

FILE NO. L: 1781998-3



DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF ORGANIZATION

Read the Instructions

- 1. ENTITY TYPE check only one to indicate the type of entity being formed:
 - LIMITED LIABILITY COMPANY

PROFESSIONAL LIMITED LIABILITY COMPANY

2. ENTITY NAME -

for naming requirements - give the exact name of the LLC:

Honstetter Performance LLC

3. PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES – if professional LLC is checked in number 1 above, describe the professional services that the professional LLC will provide (*examples*: law firm, accounting, medical):

4. STATU	TORY AGENT -			:					
ā C	EQUIRED – give the n individual or an ent or street address (no f the statutory agent	4.2 OPTIONAL – mailing address in Arizona of Statutory Agent (can be a P.O. Box):							
Arno Honst	etter		<u> </u>						
Statutory Agent N	me		- n ¹¹ - 1						
Attention (optiona				Attention (option	onal)				
30914 N 172nd St Address 1			Address 1						
Address 2 (optiona	•	AZ	85263	Address 2 (opt	onal)			T	
city Rio Ve	rde	State	Zip	City		s	itate	Zip	
4.3 REQUIRED-the form M			1002 must be	submitted alo	ong with thes	e Arti	cles of Org	anization.	

5. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

5.1 Is the Arizona known place of business address the same as the street address of the statutory agent? () Yes – go to number 6 and continue

- No go to number 5.2 and continue
- **5.2** If you answered "**No**" to number 5.1, give the **physical or street address** (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)	······································		
Address 1			
Address 2 (optional)			
City Country	State or Province	Zip	

6. DURATION - the duration or life period of the LLC is presumed to be perpetual unless one of the boxes is checked below and the corresponding blank is filled in:



The LLC's life period will end on this **date**: _____ (enter a date) The LLC's life period will end upon the occurrence of this event

(describe an event)

COMPLETE NUMBER 7 OR NUMBER 8 – NOT BOTH.

- 7. MANAGER-MANAGED LLC -- check this box \mathbf{O} if management of the LLC will be vested in a manager or managers, and complete and attach the form L040. The filing will be rejected if it is submitted without the attachment .
- check this box if management of the LLC 8. MEMBER-MANAGED LLC will be reserved to the members, and complete and attach the form L041. The filing will be rejected if it is submitted without the attachment.
- 9. ORGANIZERS list the name and address, and provide the signature, of each and every organizer - minimum of one is required. If more space is needed, check this box [] and complete and attach the form L042. L

Arno Honstetter						
Name 30914 N 172nd St			Name			
Address 1			Address	1		
Address 2 (optional) Rio Verde	AZ	85263	Address	2 (optional)		
City UNITED STATES	State	Zip	City		State	Ξφ.
SIGNATURE – By checking the box marked "I i acknowledge under penalty of p together with any attachments with Arizona law.	erjury that i is submitted	this document	By ch ackno togeti	ATURE – ecking the box mark weledge <i>under penali</i> her with any attachn Arizona law.	ty of perjury that I	this document
Signature Av no Honstette Printed Name IF SIGNING FOR AN ENTITY, CHI		HAY. 1,2012 LIN BLANK:		ure d Name MING FOR AN ENTIT	Y, CHECK ONE, FIL	Date
Corporation as Organia officer or authorized age name is:				Corporation as O officer or authorize name is:		
LLC as Organizer - I an manager, or authorized a company , and its name	agent of a ll			LLC as Organizer manager, or autho company , and its	rized agent of a li	
Filing Fee: \$50.00 (regular pro Expedited processing - add \$35 All fees are nonrefundable - see	6.00 to filing		Mail: Fax:	Arizona Corporatio Corporate Filings S 1300 W. Washingt 602-542-4100	Section	rizona 85007

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection. If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

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MEMBER STRUCTURE ATTACHMENT

ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country): 1. Honstetter Performance LLC

A.C.C. FILE NUMBER (if known): 2. Find the A.C.C. file number on the upper corner of filed documents OR on our website at:

Check one box only to indicate what document the Attachment goes with: 3.

Articles of Organization Application for Registration

Articles of Amendment Articles of Amendment to Application for Registration

MEMBERS - give the name and address of all Members. If more space is needed, use another 4. form.

Arno Honstetter						
Name			Name			
30914 N 172nd St						
Address 1		· · · · · ·	Address 1			
Audress 1			100.0001			
Address 2 (optional)			Address 2	(optional)		
Rio Verde	AZ	85263				
Chy	State or	Zip	City		State or	Zlp
UNITED STATES	Province			UNITED STATES	Province	•
Country			Country	: 		
			Name			
Name			rearrie			
			ļ			
Address 1			Address 1			
Address 2 (optional)			Address 2	(ontional)		
				(*******		
City	State or Province	Zip	City		State or Province	Zip
Country	Province		Country	:		
			Name		··	
Name			i ttallic			
Address 1			Address 1			
-			1			
Address 2 (optional)			Address 2	(optional)	I	
				7-F		
City .	State or	Zip	City	·	State or	Žip
Cirt .	Province		-		Province	
Country			Country	1		

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

STATUTORY AGENT ACCEPTANCE

Please read Instructions

 ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent:

Honstetter Performance LLC

- 2. A.C.C. FILE NUMBER (If entity is already incorporated or registered in AZ):_ Find the A.C.C. file number on the upper corner of filed documents OR on our website at:
- 3. STATUTORY AGENT NAME give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be either an individual or an entity):

Arno Honstetter

3.1 Check one box: The statutory agent is an Individual (natural person). The statutory agent is an **Entity**.

STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 3 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law.

Hor

Arno Honstetter

🖌 I ACCEPT

The 6, 2012

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REQUIRED – check only one:

Individual as statutory agent: I am signing on behalf of myself as the individual	Entity as statutory agent: I am signing on behalf of the entity named as statutory agent,
	and I am authorized to act for that entity.

Filing Fee: none (regular processing)	Mail:	Arizona Corporation Commission - Corporate Filings Section
Expedited processing – add \$35.00 to filing fee.		1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax:	602-542-4100

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