

AUG 08 2012

FILE NO. L1780028.2

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

ARTICLES OF ORGANIZATION

Read the Instructions L010i

1. ENTITY TYPE – check only one to indicate the type of entity being formed:

☒ LIMITED LIABILITY COMPANY

☐ PROFESSIONAL LIMITED LIABILITY COMPANY

2. ENTITY NAME – see Instructions L010i for naming requirements – give the exact name of the LLC:

Orange Mountain Property, 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. STATUTORY AGENT – see Instructions L010i:

4.1 REQUIRED – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:		4.2 OPTIONAL – mailing address in Arizona of Statutory Agent (can be a P.O. Box):	
James F. McClelland II			
Statutory Agent Name			
Attention (optional)		Attention (optional)	
2008 E. Aspen Drive			
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City	State	City	State
Tempe	AZ		
	85282		
Zip		Zip	
4.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.			

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	State or Province	Zip	
Country			

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** – *see Instructions L010i* – check this box ☐ if management of the LLC will be vested in a manager or managers, and complete and attach the Manager Structure Attachment form L040. *The filing will be rejected if it is submitted without the attachment.*
- 8. MEMBER-MANAGED LLC** – *see Instructions L010i* – check this box ☒ if management of the LLC will be reserved to the members, and complete and attach the Member Structure Attachment 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 Organizer Attachment form L042.

James F. McClelland II

Name

2008 E. Aspen Drive

Address 1

Address 2 (optional)

Tempe

City

AZ

State

85282

Zip

UNITED STATES

Country

SIGNATURE – *see Instructions L010i*:

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.

☒ I ACCEPT

Signature

James F. McClelland II

07/31/2012

Printed Name

Date

IF SIGNING FOR AN ENTITY, CHECK ONE, FILL IN BLANK:

- ☐ **Corporation as Organizer** – I am signing as an officer or authorized agent of a corporation and its name is:

- ☒ **LLC as Organizer** – I am signing as a member, manager, or authorized agent of a **limited liability company**, and its name is:

Orange Mountain Property, LLC

Kristin A. McClelland

Name

2008 E. Aspen Drive

Address 1

Address 2 (optional)

Tempe

City

AZ

State

85282

Zip

UNITED STATES

Country

SIGNATURE – *see Instructions L010i*:

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.

☒ I ACCEPT

Signature

Kristin A. McClelland

07/31/2012

Printed Name

Date

IF SIGNING FOR AN ENTITY, CHECK ONE, FILL IN BLANK:

- ☐ **Corporation as Organizer** – I am signing as an officer or authorized agent of a corporation and its name is:

- ☒ **LLC as Organizer** – I am signing as a member, manager, or authorized agent of a **limited liability company**, and its name is:

Orange Mountain Property, LLC

Filing Fee: \$50.00 (regular processing)
Expedited processing – add \$35.00 to filing fee.
All fees are nonrefundable – see Instructions.

Mail: Arizona Corporation Commission
Corporate Filings Section
1300 W. Washington St., Phoenix, Arizona 85007
Fax: 602-542-4100

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

1. **ENTITY NAME** – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
Orange Mountain Property, LLC

2. **A.C.C. FILE NUMBER** (if known): _____
Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>

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

- ☒ Articles of Organization ☐ Articles of Amendment
☐ Application for Registration ☐ Articles of Amendment to Application for Registration

4. **MEMBERS** – give the name and address of all **Members**. If more space is needed, use another Member Structure Attachment form.

James F. McClelland II			Kristin A. McClelland		
Name			Name		
2008 E. Aspen Drive			2008 E. Aspen Drive		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	AZ	85282	City	AZ	85282
Country	UNITED STATES	State or Province	Country	UNITED STATES	State or Province
Name			Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City		Zip	City		Zip
Country		State or Province	Country		State or Province
Name			Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City		Zip	City		Zip
Country		State or Province	Country		State or Province