



AUG 08 2012

AUG 17 2012

FILE NO. L17808295FILE NO. L1780829.5

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**ARTICLES OF ORGANIZATION***Read the Instructions L010!***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 L010! for naming requirements – give the exact name of the LLC:**R. M. MOONEY CONSULTING 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 L010!:**

<b>4.1 REQUIRED</b> – give the name (can be an individual or an entity) and <i>physical or street address</i> (not a P.O. Box) in Arizona of the statutory agent:			<b>4.2 OPTIONAL</b> – mailing address in Arizona of Statutory Agent (can be a P.O. Box):		
Richard M. Mooney <small>Statutory Agent Name</small>					
<small>Attention (optional)</small>			<small>Attention (optional)</small>		
Address 1 1797 Queen Creek Place			PO Box 90888 <small>Address 1</small>		
<small>Address 2 (optional)</small> City White Mountain Lake	<small>State</small> AZ	<small>Zip</small> 85912	<small>Address 2 (optional)</small> City White Mountain Lake	<small>State</small> AZ	<small>Zip</small> 85912
<b>4.3 REQUIRED</b> —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:

<small>Attention (optional)</small>		
<small>Address 1</small>		
<small>Address 2 (optional)</small>		
<small>City</small> Country	<small>State or Province</small>	<small>Zip</small>

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 L0101* - 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 L0101* - 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.

Richard M. Mooney

Name

Po Box 90888

Address 1

1797 Queen Creek Place

Address 2 (optional)

White Mountain Lake

AZ

85912

City

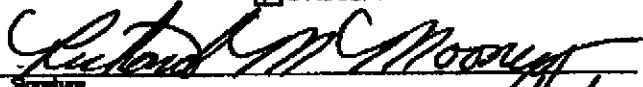
UNITED STATES

Country

**SIGNATURE** - see *Instructions L0101*

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

Richard M Mooney 8/6/12

Printed Name

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:

R.M. MOONEY CONSULTING LLC

Bonnie L. Mooney

Name

PO Box 90888

Address 1

1797 Queen Creek Place

Address 2 (optional)

White Mountain Lake

AZ

85912

City

UNITED STATES

Country

**SIGNATURE** - see *Instructions L0101*

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

BONNIE L. MOONEY 8-6-12

Printed Name

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:

R.M. MOONEY CONSULTING 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 records 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.

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

## ORGANIZER ATTACHMENT

1. **ENTITY NAME** as listed on Articles of Organization:  
R. M. MOONEY CONSULTING LLC
2. **ORGANIZERS** - List the name and address, and provide the signature, of additional ORGANIZERS of the LLC - If more space is needed, use another Organizer Attachment form.

**Richard M. Mooney**

Name  
**PO Box 90888**  
Address 1  
**1797 Queen Creek Place**  
Address 2 (optional)  
**White Mountain Lake** **AZ** **85912**  
City State Zip  
**UNITED STATES**  
Country

**SIGNATURE - see Instructions 10101:**

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  
*Richard M. Mooney*  
Printed Name  
**Richard M. Mooney** **8/6/12**  
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:

R.M. MOONEY CONSULTING LLC

**Bonnie L. Mooney**

Name  
**PO Box 90888**  
Address 1  
**1797 Queen Creek Place**  
Address 2 (optional)  
**White Mountain Lake** **AZ** **85912**  
City State Zip  
**UNITED STATES**  
Country

**SIGNATURE - see Instructions 10101:**

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  
*Bonnie L. Mooney*  
Printed Name  
**BONNIE L. MOONEY** **8-6-12**  
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:

R.M. MOONEY CONSULTING LLC

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## MANAGER STRUCTURE ATTACHMENT

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

R.M. MOONEY CONSULTING LLC

2. **A.C.C. FILE NUMBER** (if known): L-1780829-5

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. **MANAGERS / MEMBERS** – give the name and address of each and every **manager** and list all **members who own 20% or more** of the profits or capital of the LLC. Members who own less than 20% may also be listed, but it is not required. Check the appropriate box or boxes below each person listed – **do not check both member boxes**. If more space is needed, use another **Manager Structure Attachment** form.

Name <u>RICHARD M. MOONEY</u>				Name <u>BONNIE L MOONEY</u>			
Address 1 <u>PO Box 90888</u>				Address 1 <u>PO Box 90888</u>			
Address 2 (optional) <u>1797 QUEEN CREEK PLACE</u>				Address 2 (optional) <u>1797 QUEEN CREEK PLACE</u>			
City <u>WHITE MOUNTAIN LAKE</u>		State or Province <u>AZ</u>		City <u>WHITE MOUNTAIN LAKE</u>		State or Province <u>AZ</u>	
Country <u>U.S.A.</u>		Zip <u>85912</u>		Country <u>U.S.A.</u>		Zip <u>85912</u>	
<input checked="" type="checkbox"/> Manager		<input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member		<input type="checkbox"/> Manager		<input checked="" type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member	
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province		City		State or Province	
Country		Zip		Country		Zip	
<input type="checkbox"/> Manager		<input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member		<input type="checkbox"/> Manager		<input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member	
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province		City		State or Province	
Country		Zip		Country		Zip	
<input type="checkbox"/> Manager		<input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member		<input type="checkbox"/> Manager		<input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member	