



AZ CORPORATION COMMISSION
FILED

ARTICLES OF ORGANIZATION

MAR 05 2013

OF

FILE NO. L-1830110-9 NORTH 43RD PLACE, LLC
an Arizona Limited Liability Company

1. Name of this limited liability company: NORTH 43RD PLACE, LLC
2. Address of the known place of business in Arizona:

5714 East Miramonte Drive
Cave Creek, Arizona 85331
Physical Address

PO Box 374
Cave Creek, Arizona 85327-0374
Mailing Address

3. Name and address of the Statutory Agent:

GARY J. FERGUSON
5714 East Miramonte Drive
Cave Creek, Arizona 85331
Physical Address

PO Box 374
Cave Creek, Arizona 85327-0374
Mailing Address

4. Management structure: vested in a Manager or Managers
5. Names and addresses of the Managers:

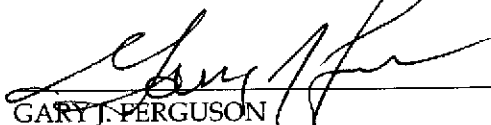
GARY J. FERGUSON
PO Box 374
Cave Creek, Arizona 85327-0374

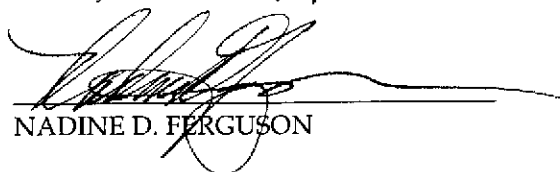
NADINE D. FERGUSON
PO Box 374
Cave Creek, Arizona 85327-0374

6. Name and address of the Member:

GARY J. FERGUSON and NADINE D. FERGUSON, Trustees, or their
successors in trust, under the FERGUSON LIVING TRUST, dated
February 17, 2000, and any amendments thereto
PO Box 374
Cave Creek, Arizona 85327-0374

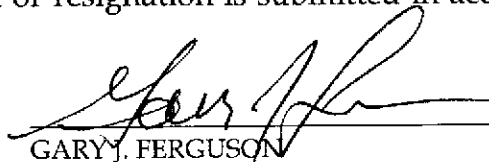
IN WITNESS WHEREOF, we have hereunto affixed our signatures on February 27, 2013.


GARY J. FERGUSON


NADINE D. FERGUSON

STATUTORY AGENT DESIGNATION

I, GARY J. FERGUSON, having been designated to act as Statutory Agent, hereby
consent to act in that capacity until removed or resignation is submitted in accordance
with the Arizona Revised Statutes.


GARY J. FERGUSON

Return Corporate Documents To:
The Record Reporter

P.O. BOX 33007 • PHOENIX, AZ 85067 • FAX 602-417-9910

CLIENT NAME: **MORRIS HALL & KINGHORN**

CORPORATE NAME: **NORTH 43RD PLACE, LLC**

TYPE OF DOCUMENT: **AO**

☒ **EXPEDITED FILING REQUESTED** RECEIVED

MAR 05 2013

(For Record Reporter Use Only)

CLIENT PICK-UP/FILING – SPECIAL INSTRUCTIONS:

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

RECEIVED

MAR 05 2013

ARIZONA CORPORATION COMMISSION FILING COMMENTS:

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

*If changes or corrections are necessary, please make notes in the Comment Area provided above
or call The Record Reporter at 602-417-9900. —Thank You.

TO THE EXAMINER AT THE ACC

**PLEASE RETURN ALL DOCUMENTS TO THE RECORD REPORTER
BOX LOCATED IN YOUR OFFICE FOR PICK UP. PLEASE DO NOT
MAIL DOCUMENTS OR CONTACT CUSTOMER DIRECTLY TO PICK UP
DOCUMENTS. THANK YOU.**

**ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION COVER SHEET**

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: NORTH 43RD PLACE, 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 checked="" type="checkbox"/> Articles of Organization (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input checked="" 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 type="checkbox"/> Affidavit of Publication	<input 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 (RECEIVED) (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 (MAR 9 2013) (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

SELECT PAYMENT TYPE:

DO NOT WRITE YOUR CREDIT CARD NUMBER ON THIS FORM!

☒ Check Check # 13827 Check Amount \$ 85.00
☐ 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:** _____
Leona Gibson - Record Reporter (602) 417-9900
Address: _____
1505 North Central Avenue, #200
City: _____ **State:** _____ **Zip:** _____
Phoenix Arizona 85004

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: _____ **DATE:** _____

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