

AZ CORPORATION COMMISSION
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AZ Corp. Commission
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DEC 30 2013

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AZ CORPORATION COMMISSION
FILED

FILE NO. L-18944630-8

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APR 23 2014

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

ARTICLES OF ORGANIZATION

Read the Instructions L0101

FILE NO. L18944630-8

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 L0101 for naming requirements - give the exact name of the LLC:

Onalys Victore Agency, 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 L0101:

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):	
Statutory Agent Name <u>Onalys Victore</u>			
Attention (optional) <u>8238 W Cactus Rd. Ste 102</u>		Attention (optional)	
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City <u>Peoria</u>	State <u>AZ</u> Zip <u>85381</u>	City	State 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)			
<u>8436 N. 37th Ave</u>			
Address 1			
Address 2 (optional)			
City Country	<u>Phoenix</u>	State or Province <u>AZ</u>	Zip <u>85051</u>

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.

Name Ohalys Victore
Address 1 8436 N. 37th Ave.
Address 2 (optional) Phoenix AZ 85051
City State Zip
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 
Printed Name Ohalys Victore Date 12/30/2013

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:

Ohalys Victore Agency, LLC

Name _____
Address 1 _____
Address 2 (optional) _____
City State Zip
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 _____
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:

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.

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

MEMBER STRUCTURE ATTACHMENT

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

Ohalys Victore Agency, 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.

Name <u>Ohalys Victore</u>			Name		
Address 1 <u>8436 N. 37th Ave</u>			Address 1		
Address 2 (optional) <u>Phoenix</u>		State or Province <u>AZ</u>	Address 2 (optional)		Zip <u>85051</u>
City <u>United States</u>	Country		City	Country	
Name			Name		
Address 1			Address 1		
Address 2 (optional)		State or Province	Address 2 (optional)		Zip
City	Country		City	Country	
Name			Name		
Address 1			Address 1		
Address 2 (optional)		State or Province	Address 2 (optional)		Zip
City	Country		City	Country	

STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

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

Ohalys Victore Agency, 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: <http://www.azcc.gov/Divisions/Corporations>

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):

Ohalys Victore

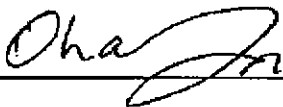
- 3.1 **Check one box:** ☒ The statutory agent is an **Individual** (natural person).
☐ The statutory agent is an **Entity**.

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.

☒ I ACCEPT



Ohalys Victore

12/30/2013

Signature

Printed Name

Date

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)
Expedited processing – (available only if this form is submitted by itself) 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.

Reg

COMMISSIONERS
BOB STUMP - Chairman
GARY PIERCE
BRENDA BURNS
BOB BURNS
SUSAN BITTER SMITH



JODI JERICH
Executive Director

PATRICIA L. BARFIELD
Director
Corporations Division

ARIZONA CORPORATION COMMISSION

OHALYS VICTORE AGENCY LLC
OHALYS VICTORE
8436 N 37TH AVE

PHOENIX, AZ 85051

Effective Date: 03/20/2014
File No: L-1894630-8

Thank you for delivering documents for filing with the Arizona Corporation Commission. Unfortunately, we are returning the enclosed document regarding the above-referenced corporation/limited liability company for the following reasons:

The filing fee has been deposited.

The document type on the Manager/Member Structure Attachment must be consistent with the documents being filed.

-As previously requested the box selected in section 3 on the Member Structure Attachment must be corrected.

*****IMPORTANT*****
Follow the instructions below to resubmit your document. If you originally paid for expedited processing, the resubmitted document will be processed within the current posted expedited time frame after we receive the resubmission, and no additional fees are owed. If you originally paid for regular processing time, the resubmitted document will be processed within the current posted regular time frame after we receive the resubmission, and no additional fees are owed. If you want to upgrade from regular processing to expedited processing, then you can pay the \$35.00 expedite fee when you resubmit the document.

Please Note: Companies must return the corrected document within thirty (30) calendar days of the rejection date to retain the original file date.

Return the following information to the Corporations Division:

1. A copy of this letter and the rejected document.
2. The corrected document accompanied by any additional paperwork or filing fees, as requested within this letter.

If you have any questions, please feel free to contact the Customer Service Call Center at 602-542-3026, or Arizona residents only may use the toll free number 800-345-5819.

TO SUBSCRIBE TO THE ANNUAL REPORT EMAIL REMINDER SERVICE, GO ONLINE TO WWW.AZCC.GOV/DIVISIONS/CORPORATIONS, THEN CLICK ON THE LINK TO SEARCH FOR YOUR ENTITY. ON YOUR ENTITY'S PAGE, CLICK ON THE BUTTON FOR "SUBSCRIBE TO ANNUAL REPORT EMAIL REMINDER." IF YOU CHOOSE NOT TO SUBSCRIBE YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

FIL: 001
REV. 12/2012

**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: Ohalys Victore Agency 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"/> \$ 80.00	<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 checked="" 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"/> \$ 60.00	<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 () (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

RECEIVED

JAN 8 1 2014

**ARIZONA CORP COMMISSION
CORPORATIONS DIVISION**

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 -- for in-person filings only (Do not send cash in the mail) Cash Amount \$ _____

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

☐ No fee required

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

☒ E-mail: ohalys.victore@gmail.com

For Mail or Pick Up - 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 ONE WEEK).

Person or Company Name: _____

Phone Number: _____

Ohalys Victore

Address: _____

8436 N 37th Ave

City: _____

Phoenix

State: _____

Arizona

Zip _____

85051

PICK-UP BY: _____

FOR ARIZONA CORPORATION COMMISSION USE ONLY

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

