



04663232

AZ CORPORATION COMMISSION
FILEDAZ CORPORATION COMMISSION
FILED

MAR 06 2014

APR 07 2014

FILE NO. R-1909936-4FILE NO. R-1909936-4AZ CORPORATION COMMISSION
FILED

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

**APPLICATION FOR REGISTRATION
OF FOREIGN LIMITED LIABILITY COMPANY***Please read Instructions L0251*

MAY 30 2014

FILE NO. R-1909936-4

- 1. ENTITY TYPE - check only one**
- to indicate the type of entity applying for registration:

☒ LIMITED LIABILITY COMPANY☐ PROFESSIONAL LIMITED LIABILITY COMPANY

- 2. NAME IN STATE OR COUNTRY OF FORMATION (FOREIGN NAME) -**
- enter the exact, true name of the foreign LLC:

Superior Support Properties LLC

- 3. NAME TO BE USED IN ARIZONA (ENTITY NAME) -**
- Identify the name the foreign LLC will use in Arizona by checking 3.1 or 3.2 (check only one), and follow instructions:

3.1 ☒ **Name in state or country of formation, with no changes or additions -** go to number 4 and continue.**3.2** ☐ **Fictitious name -** check this if the foreign LLC's name in its state or country of formation is not available for use in Arizona or if that name does not contain an LLC identifier, and enter the name in number 3.3 below. **NOTE -** a resolution of the company adopting the fictitious name must be attached to and submitted with this form.**3.3** **If you checked 3.2, enter or print the name to be used in Arizona:**

- 4. 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):

- 5. FOREIGN DOMICILE -**
- list the state or country in which the foreign LLC was formed:

OregonAZ CORPORATION COMMISSION
FILED

MAY 08 2014

- 6. DATE OF FORMATION IN FOREIGN DOMICILE:**
- 03/22/2002

FILE NO. R-1909936-4

- 7. PURPOSE OR GENERAL CHARACTER OF BUSINESS -**
- describe or state the purpose of the foreign LLC or the general character of the business it proposes to transact in Arizona:
-
- property management/rental

8. STATUTORY AGENT IN ARIZONA:					
8.1 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:			8.2 OPTIONAL – Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):		
Martin Mazurik <small>Statutory Agent Name (required)</small>					
Attention (optional) 11940 W Nadine Way <small>Address 1</small>			Attention (optional) <small>Address 1</small>		
Address 2 (optional) City Peoria		AZ <small>State</small>	85383 <small>Zip</small>	Address 2 (optional) City <small>State</small> <small>Zip</small>	
8.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with this Application For Registration.					

- 9. PRINCIPAL OFFICE ADDRESS - FOREIGN DOMICILE STREET ADDRESS** – *see Instructions L025/* – give the **physical or street address** (not a P. O. Box) of the foreign LLC required to be maintained in its state of organization, or, if not so required, of the foreign LLC's statutory agent in its state or country of organization:

Ann Mazurik <small>Attention (optional)</small>		
14294 SE Big Timber Ct <small>Address 1</small>		
Address 2 (optional) Happy Valley		OR <small>State or Province</small>
City	97015 <small>Zip</small>	
Country	UNITED STATES	

10. OPTIONAL – ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

- 10.1** Is the Arizona known place of business street address the same as the **street address** of the statutory agent? ☐ Yes - go to the next page and continue.
☐ No - complete number 10.2 and continue.
- 10.2** If you answered "no" to number 10.1, 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		

COMPLETE NUMBER 11 OR NUMBER 12 – NOT BOTH.

11. **MANAGER-MANAGED LLC** – see *Instructions L025I* – check this box ☐ if management of the LLC is 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.*
12. **MEMBER-MANAGED LLC** – see *Instructions L025I* – check this box ☒ if management of the LLC is 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.*
13. **SIGNATURE:** 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

Ann M. Mazurik
Signature

Ann Mazurik
Printed Name

02/28/2014
Date

REQUIRED – check only one and fill in the corresponding blank if signing for an entity:

<input type="checkbox"/> I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named:	<input checked="" type="checkbox"/> I am a Member of this member-managed LLC or I am signing for an entity member named:	<input type="checkbox"/> I am a duly authorized agent for this LLC.
---	--	---

Filing Fee: \$150.00 (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.

MEMBER STRUCTURE ATTACHMENT

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

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

1. Martin Mazurik Name				2. Ann Mazurik Name			
Address 1 14294 SE Big Timber Ct				Address 1 14294 SE Big Timber Ct			
Address 2 (optional) Happy Valley		OR		97015		Address 2 (optional) Happy Valley	
City UNITED STATES		State or Province		Zip 97015		City UNITED STATES	
Country						Country	
3. Name				4. Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province		City		State or Province	
Country				Country			
5. Name				6. Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province		City		State or Province	
Country				Country			
7. Name				8. Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province		City		State or Province	
Country				Country			

Clear Form

Print Form

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

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:

Superior Support Properties 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):

Martin Mazurik

- 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



Martin Mazurik

02/28/2014

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.

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

Superior Support Properties, LLC

was

Registered

under the Oregon

Secretary of State, Corporation Div.

on

03/22/02

and is active on the records of the Corporation Division as of
the date of this certificate.



In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.

KATE BROWN, Secretary of State

04/17/14