

APR 08 2014

APR 18 2014

AZ CORPORATION COMMISSION  
FILEDFILE NO. L-1917355-8FILE NO. L-1917355-8

MAY 09 2014

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

## ARTICLES OF ORGANIZATION

Read the Instructions L010i

FILE NO. L-1917355-8

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

☒ LIMITED LIABILITY COMPANY  
(entity name must contain  
the words "Limited Liability  
Company" or "LLC")☐ PROFESSIONAL LIMITED LIABILITY COMPANY  
(entity name must contain the words  
"Professional Limited Liability Company" or  
"PLLC")

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

Conexsoft, LLC

## 3. PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES - if and only 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 for service of process - see Instructions L010i

4.1 REQUIRED - give the name (can be an Arizona resident or an Arizona-registered 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>Michael Sweet</u>			
Attention (optional) <u>7482 West Desert Cove Ave.</u>		Attention (optional)	
Address 1		Address 1	
Address 2 (optional) City <u>Peoria</u>	State <u>AZ</u> Zip <u>85345</u>	Address 2 (optional) City	State <u>AZ</u> 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)		State or Province <u>AZ</u>
City Country <u>U.S.A.</u>	Zip	



**6. DURATION** - If the duration or life period of the LLC is perpetual (forever), then skip this section and continue to number 7 or number 8. Otherwise, check only one box below *and* fill in the corresponding blank:

- ☐ 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 (meaning one or more managers will run the company) and complete and attach **ONLY** the Manager Structure Attachment form L040. (Both members and managers will be listed on the Manager Structure Attachment.) *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 (meaning all members will run the company together if there is no operating agreement stating otherwise), and complete and attach **ONLY** the Member Structure Attachment form L041. (All members will be listed on the Member Structure Attachment.) *The filing will be rejected if it is submitted without the attachment.*

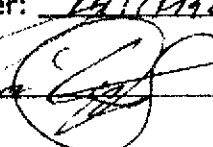
**9. ORGANIZERS and SIGNATURE** - the individual or pre-existing entity submitting this document is the Organizer - list the name of the Organizer below. If the Organizer is an individual, that individual must sign below. If the Organizer is a pre-existing entity, provide the signature of the individual acting for that entity, then print the individual's name.

The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Organizer: \_\_\_\_\_

*Michael Sweet*

Signature \_\_\_\_\_



Date \_\_\_\_\_

*04-15-2014*

Printed Name (if different from Organizer) \_\_\_\_\_

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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- ☐ 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)

\_\_\_\_\_  
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The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Organizer: \_\_\_\_\_

*Michael Sweet*

Signature \_\_\_\_\_

*04-07-2014*  
Date

Printed Name (if different from Organizer) \_\_\_\_\_

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1300 W. Washington St., Phoenix, Arizona 85007  
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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):

ComexSoft, 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. 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. Use one block per person. 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.

1. <u>Michael Sweet</u> Name <u>7482 West Desert Cove Ave.</u> Address 1 Address 2 (optional) City <u>Peoria</u> State or Province <u>AZ</u> Zip <u>85345</u> Country <input checked="" type="checkbox"/> 20% or more member <input checked="" type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member	2. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> 20% or more member <input type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member
3. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> 20% or more member <input type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member	4. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> 20% or more member <input type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member
5. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> 20% or more member <input type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member	6. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> 20% or more member <input type="checkbox"/> Manager <input type="checkbox"/> Less than 20% member





**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: COMPLEX SOFTWARE, 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 type="checkbox"/> Articles of Organization (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input type="checkbox"/> <b>RECEIVED</b>
<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 ( ) (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

**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: \_\_\_\_\_

**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: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip \_\_\_\_\_

<b>FOR ARIZONA CORPORATION COMMISSION USE ONLY</b>	
PICK-UP BY: _____	DATE: _____

View current process times at: [www.azcc.gov/Divisions/Corporations](http://www.azcc.gov/Divisions/Corporations)



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



**ARIZONA CORPORATION COMMISSION**

JODI JERICH  
Executive Director

PATRICIA L. BARFIELD  
Director  
Corporations Division

CONEXSOFT, LLC  
MICHAEL SWEET  
7482 W DESERT COVE AVE

PEORIA, AZ 85345

Effective Date: 04/22/2014  
File No: L-1917355-8

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:

Box 7 was checked indicating a Manager-Managed LLC and the corresponding Manager Structure Attachment form was submitted, however, a Member Structure Attachment form was also submitted. As previously stated, please do not include both a Manager Structure Attachment form and a Member Structure Attachment form. If checking box 7 submit only a Manager Structure Attachment form. If checking box 8 submit only a Member Structure Attachment form. Do not include both structure attachment forms.

\*\*\*\*\*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](http://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.

