AZ Corp. Commission

JUL 2 8 2014

FILE NO.	L_	190	110	104	<u>-</u> 0
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DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF ORGANIZATION

			^	Read the	Instructions	<u>L010i</u>				
1.	FNTTTY	TYPE - check	only	one to indicate	e the type of	entity be	ing form	red:		
	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.	Best Equipmentsales LLC							C: -		
3.	PROFES	SIONAL LIMI number 1 above, o inting, medical):	ren i i	ARTITTY COL	MPANY SER	VICES -	if and onl al LLC will	y if profe provide (ssional LLC is examples: law	
	CT 4 TUT	ORY ACENT fo	r cor	ice of proces	s – see Inst	ructions i				
4.	 STATUTORY AGENT for service of proces 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):					
	atory Agent Nam	exis Cm	JZ_		Attention (option	al)				
Addr	ess 1	. Valladol	lid I	orive	Address 1					
Addr	ess 2 (optional)		AZ	0574/	Address 2 (option	nal)		AZ State	Zip	
City		IRED— the <u>Statutor</u>	State			ubmitted al	ona with t			ation.
5.	ARIZO I 5.1 Is	Attention (optional)	ACE C	F BUSINESS Lace of busines Yes – go to no No – go to no to number 5.1	ADDRESS: ss address thumber 6 and umber 5.2 ar , give the ph	e same a continue nd continu	s the st i ie r street	reet ad	dress of the	e
		Address 1								
		Address 2 (optional)				AZ				
	·	City Country	U.:	S.A.		State or Province	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 <i>and</i> 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)
C	OMPLETE NUMBER 7 OR NUMBER 8 – NOT BOTH.
U	
7.	MANAGER-MANAGED LLC – <u>see Instructions L010i</u> – 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 <u>Manager Structure Attachment form L040</u> . (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 - <u>see Instructions L010i</u> - 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 <u>Member Structure Attachment form L041</u> . (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.
0	rganizer: Alexis Cruz
	7/28/2014
S	gnature
P	rinted Name (if different from Organizer)
Fili	Mail: Arizona Corporation Commission Corporate Filings Section

Filing Fee: \$50.00 (regular processing)
Expedited processing – add \$35.00 to filing fee.
All fees are nonrefundable - see Instructions. 1300 W. Washington St., Phoenix, Arizona 85007 602-542-4100 Fax: 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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MEMBER STRUCTURE ATTACHMENT

1	ENTITY NAME - give the exact Best Eq	name of the	LLC (foreign	LLCs - giv	e name in domicile s	tate or country):	
2.	A.C.C. FILE NUMBER (if known Find the A.C.C. file number on the up					azcc.gov/Olvisions	/Corporations
3.	Check one box only to indicate what document the Attachment goes with: Articles of Organization Application for Registration Articles of Amendment to Application for Registration						
4.	MEMBERS - give the name and Attachment form.	address of a	il Members.	If more s	pace is needed, use	another Member	Structure
Nem	Alexis Cruz 607 W. Valladolid	1		Name Address 1			
City	10C30N	AZ State or Province	85746 Zip	Address 2 (o	ptional)	State or Province	Zip
Nar	ne			Name Address 1			
	dress 2 (opbonal)	State or Province	Zip	Address 2 (optional)	State or Province	Zip
	untry			Country Name			
	idress 1 idress 2 (optional)				(optional)	State or	Zlp
C	ity	State or Province	Zip	City		Province	

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STATUTORY AGENT ACCEPTANCE

Please read Instructions MODZI

	Please Feat Instructions 1760ar						
1.	ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation): Best Equipment Seles LLC						
2.	Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/pivisions/corporation						
3.	entity listed in number 1 above (this will be either an individual or an entity). NOTE the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:						
	Alexis Cruz						
ST	ATUTORY 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 appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first. 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.						
	Alexis Com 7/28/14						
<u>-</u>	ignature Printed Name Date						
R	EQUIRED - check only one:						
	Individual as statutory agent: I am signing on behalf of myself as the individual signing on behalf of myself as the individual and I am authorized to act for that entity.						
L_							
	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						
Ш.	What should near private legal counsel for those matters that may pertain						

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal control 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.