

JAN 20 2015

FILE NO. R. 1978270.5

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**APPLICATION FOR REGISTRATION  
OF FOREIGN LIMITED LIABILITY COMPANY**

*Please read Instructions L025i*

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:

JoBen, 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:

Minnesota

6. **DATE OF FORMATION IN FOREIGN DOMICILE:** 03/03/2006

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:  
real estate holding company

<b>8. STATUTORY AGENT IN ARIZONA:</b>					
<b>8.1 REQUIRED</b> – give the <b>name</b> (can be an individual or an entity) <b>and physical or street address</b> (not a P.O. Box) in Arizona of the statutory agent:			<b>8.2 OPTIONAL</b> - Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):		
Statutory Agent Name (required) <i>Applied Business Communications of Arizona, LLC</i>					
Attention (optional)			Attention (optional)		
Address 1 2320 West Mission Lane, Suite 3			Address 1		
Address 2 (optional) City <b>Phoenix</b>		State <b>AZ</b>	Zip <b>85021</b>	Address 2 (optional) City State Zip	
<b>8.3 REQUIRED</b> – 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 L025i* – 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:

Merrily Karel		
Attention (optional)		
13731 47th Street Court N		
Address 1		
Address 2 (optional) Stillwater		MN
City	State or Province	Zip
Country	UNITED STATES	

**10. OPTIONAL – ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:**

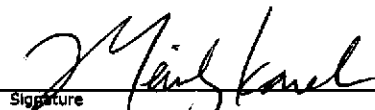
- 10.1** Is the Arizona known place of business street address the same as the **street address** of the statutory agent? ☐ Yes - go to the next page and continue.  
☒ No - complete number 10.2 and continue.
- 10.2** If you answered "no" to number 10.1, give the physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)		
7687 West Robin Lane		
Address 1		
Address 2 (optional) Peoria		AZ
City	State or Province	Zip
Country	UNITED STATES	

**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



Merrily Karel

01/15/2015

Signature

Printed Name

Date

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

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

## 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 (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):

JoBen, LLC

2. **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). **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:

Applied Business Communications of Arizona, LLC

### 3. STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 2 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.

  
Signature

Merrily A. Karel

Printed Name

01/15/2015

Date

**REQUIRED** – check only one:

☐ **Individual as statutory agent:** I am signing on behalf of myself as the individual (natural person) named as statutory agent.

☒ **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 – not applicable.  
All fees are nonrefundable – see Instructions.

Mail: Arizona Corporation Commission – Corporate Filings Section  
1300 W. Washington St., Phoenix, Arizona 85007  
Fax: 602-542-4100

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## MEMBER STRUCTURE ATTACHMENT

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

<input type="checkbox"/> Articles of Organization	<input type="checkbox"/> Articles of Amendment
<input checked="" type="checkbox"/> Application for Registration	<input type="checkbox"/> 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.

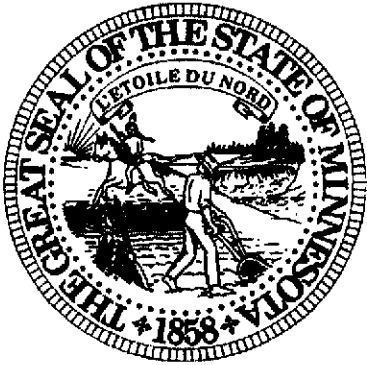
Merrily A. Karel				John Karel			
Name				Name			
13731 47th St. Ct. N				13731 47th St. Ct. N			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
Stillwater		MN	55082	Stillwater		MN	55082
City		State or Province	Zip	City		State or Province	Zip
Country		UNITED STATES		Country		UNITED STATES	
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province	Zip	City		State or Province	Zip
Country		UNITED STATES		Country		UNITED STATES	
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City		State or Province	Zip	City		State or Province	Zip
Country				Country			

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	JoBen, LLC
Date Filed:	03/03/2006
File Number:	1741549-2
Minnesota Statutes, Chapter:	322B
Home Jurisdiction:	Minnesota

This certificate has been issued on: 01/15/2015



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota