JAN 1 2 2015

FILE NO.	4976401	3
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DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

## **ARTICLES OF ORGANIZATION**

		the Instructions <u>L010i</u>					
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	r full naming requirements – give the exact name of the LLC:					
	Flunky Robot 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 pro	ocess - see Instructions L010i					
	<b>4.1</b> REQUIRED – give the name (can be an Arizona resident or an Arizona-registered entity) and physical or street address (n. P.O. Box) in Arizona of the statutory agent:	d of Statutory Agent (can be a P.O. Box):					
	drew Root Utory Agent Name						
	ntion (optional)	Attention (optional)					
	575 W Sanders Way	Address 1					
	ess 2 (optional) AZ 85138 Maricopa	Address 2 (optional) AZ					
City	, Jake   249	City   State   Zip orm M002 must be submitted along with these Articles of Organization.					
	4.3 REQUIRED— the <u>Statutory Agent Acceptance</u> to	in in 1902 must be submitted along with these Ardicles of Organization.					
5.	ARIZONA KNOWN PLACE OF BUSINE	SS ADDRESS:					
	statutory agent? 🎅 Yes – go to	iness address the same as the <b>street address</b> of the number 6 and continue number 5.2 and continue					
	5.2 If you answered "No" to number ! Box) of the known place of busine	5.1, give the <b>physical or street address</b> (not a P.O. ess of the LLC in Arizona:					
	Attention (optional)						
	Address 1						
	Address 2 (optional)	AZ					
	City U.S.A.	State or Zip Province					

6. DURATION – if the duration or life period of section and continue to number 7 or number 8 the corresponding blank:	the LLC is perpetual (forever), then skip this  3. Otherwise, check only one box below <i>and</i> fill in
The LLC's life period will end on this date:	(enter a date)
The LLC's life period will end upon the occurrent	ce of this event: (describe an event)
COMPLETE NUMBER 7 OF NUMBER 9	· NOT DOTA
COMPLETE NUMBER 7 OR NUMBER 8 -	- NOI BOIH.
LLC will be vested in a manager or managers company) and complete and attach ONLY the	Manager Structure Attachment form L040. (Both Manager Structure Attachment.) The filing will be
	g all members will run the company together if wise), and complete and attach ONLY the <u>Member</u> rs will be listed on the Member Structure
is the Organizer - list the name of the Organiz	lual or pre-existing entity submitting this document er below. If the Organizer is an individual, that a pre-existing entity, provide the signature of the individual's name.
The person signing below declares and that the information contained within attachments is true and correct, and is Arizona law.	this document together with any
Organizer: Andrew Root	
andrew Box	1/9/15
Signature	Date
-	
Printed Name (if different from Organizer)	
•	
Filing Fee: \$50.00 (regular processing)	Mail: Arizona Corporation Commission
Filing Fee: \$50.00 (regular processing)  Expedited processing – add \$35.00 to filing fee.  All fees are nonrefundable - see Instructions.	Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007

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.

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):			
	Flunky Robot 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 <u>Member Structure</u> <u>Attachment</u> form.

				·		
1. Andrew Root			Leanne Root			
Name	**	<del></del>	Name			
40575 W Sanders Way			40575 W Sanders Way			
Address 1			Address	1	•	
Address 2 (optional)				2 (optional)		05400
Maricopa	AZ	85138	Mari	copa	AZ	85138
Cit	State or	Zip	City	UNITED STATES	<ul> <li>State or Province</li> </ul>	Zip
Country UNITED STATES	Province		Country	DIVITED STATES		
3.			4.			
			1			
Name			Name			
Address 1	· · · · · · · · · · · · · · · · · · ·		Address	1		
Address 2 (optional)			Address	2 (optional)		
			1			
City	- State or	Zip	City		<ul> <li>State or Province</li> </ul>	Zip
Country	Province		Country	<u></u>	Florince	***
5.			6.	****		
<u> </u>						
Name			Name			
Address 1			Address 1			
			1			
Address 2 (optional)			Address	2 (optional)		
	İ					
City	- State or	Zip	City		<ul> <li>State or Province</li> </ul>	Zip
Country	Province		Country	***************************************	Trovince	
7.			8.	***		•
			1			
Name			Name			
Ì						
Address 1			Address	1		
			1			
Address 2 (optional)			Address	2 (optional)		
City	- State or	Zip	City	<u> </u>	State or	Zip
Country	Province		Country		Province	
Councy /						***

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## STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

1.	<b>ENTITY NAME –</b> give the <b>exact</b> 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):  Flunky Robot 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:				
	Andrew Root				
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.				
Sign	Indrew Root 1/9/15 Blue Printed Name Root 1/9/15				
REG	QUIRED - check only one:				
1-	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.				
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Mail:

Fax:

602-542-4100

Arizona Corporation Commission - Corporate Filings Section

1300 W. Washington St., Phoenix, Arizona 85007

Filing Fee: none (regular processing)

Expedited processing - not applicable.

All fees are nonrefundable - see Instructions.