

AZ CORPORATION COMMISSION  
FILEDAZ CORPORATION COMMISSION  
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FILE NO.

R-2073077-5FILE NO. R-2073077-5

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

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

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:

Mastercraft Dealer Services, 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:

Utah

6. **DATE OF FORMATION IN FOREIGN DOMICILE:** 04/22/2008

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:
- Storage facility



<b>8. STATUTORY AGENT IN ARIZONA:</b>					
<b>8.1 REQUIRED</b> - give the name (can be an individual or an entity) and <b>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):		
Corporation Service Company					
Statutory Agent Name (required)					
Attention (optional)			Attention (optional)		
2338 W. Royal Palm Road, Suite J					
Address 1			Address 1		
Address 2 (optional)		AZ	85021	Address 2 (optional)	
City	Phoenix	State	Zip	City	State Zip
<b>8.3 REQUIRED</b> - the <u>Statutory Agent Information</u> form M002 must be submitted along with this Application For Registration.					

- 9. PRINCIPAL OFFICE ADDRESS - FOREIGN DOMICILE STREET ADDRESS** - ~~give the physical or street address~~ - 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:

Paul H. Shaphren		
Attention (optional)		
10 E. South Temple, Suite 900		
Address 1		
Address 2 (optional)		
Salt Lake City		UT
City	State or Province	Zip
Country	UNITED STATES	84133

**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:

Wayne Sorensen		
Attention (optional)		
655 Haul Road		
Address 1		
Address 2 (optional)		
Page		AZ
City	State or Province	Zip
Country	UNITED STATES	86040



**COMPLETE NUMBER 11 OR NUMBER 12 – NOT BOTH.**

11. **MANAGER-MANAGED LLC** – ~~check this box ☐ if management of the LLC is reserved to the members, and complete and attach the Member-Managed Attachment form L041.~~ ~~The filing will be rejected if it is submitted without the attachment.~~ – check this box ☒ if management of the LLC is vested in a manager or managers, and complete and attach the ~~Member-Managed Attachment form L041.~~ ~~The filing will be rejected if it is submitted without the attachment.~~
12. **MEMBER-MANAGED LLC** – ~~check this box ☒ if management of the LLC is reserved to the members, and complete and attach the Member-Managed Attachment form L041.~~ ~~The filing will be rejected if it is submitted without the attachment.~~ – check this box ☐ if management of the LLC is reserved to the members, and complete and attach the ~~Member-Managed 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


Wayne R. Sorensen

02/26/2016

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

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

1. **ENTITY NAME** - give the exact name of the LLC (foreign LLCs - give name in domicile state or country):  
**Mastercraft Dealer Services, 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.

<b>1. Wayne R. Sorensen</b> Name <b>11017 South Jordan Gateway</b> Address 1 Address 2 (optional) <b>South Jordan</b> <b>UT</b> <b>84095</b> City State or Province Zip <b>UNITED STATES</b> Country <input checked="" type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member				<b>2. Rusty D. Needs</b> Name <b>1527 Timoney Road</b> Address 1 Address 2 (optional) <b>Draper</b> <b>UT</b> <b>84020</b> City State or Province Zip <b>UNITED STATES</b> Country <input checked="" type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member			
<b>3.</b> Name Address 1 Address 2 (optional) City State or Province Zip <b>UNITED STATES</b> Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member				<b>4.</b> Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member			
<b>5.</b> Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member				<b>6.</b> Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member			





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**STATUTORY AGENT ACCEPTANCE***Please read Instructions M0021*

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);  
Mastercraft Dealer Services, 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:

Corporation Service Company

**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.

Corporation Service Company

By:   
SignatureRosemarie Gagliardino  
Assistant Vice President

Printed Name

2/26/16  
Date**REQUIRED** – check only one:

- |                                                                                                                                                              |                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Individual as statutory agent:</b> I am signing on behalf of myself as the individual (natural person) named as statutory agent. | <input checked="" type="checkbox"/> <b>Entity as statutory agent:</b> 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

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.  
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If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.





**Utah Department of Commerce  
Division of Corporations & Commercial Code**

160 East 300 South, 2nd Floor, PO Box 146705

Salt Lake City, UT 84114-6705

Service Center: (801) 534-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 534-6438

Web Site: <http://www.commerce.utah.gov>

02/26/2016

6986390-016002262016-225050

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## **CERTIFICATE OF EXISTENCE**

<b>Registration Number:</b>	6986390-0160
<b>Business Name:</b>	MASTERCRAFT DEALER SERVICES, LLC
<b>Registered Date:</b>	April 22, 2008
<b>Entity Type:</b>	LLC - Domestic
<b>Current Status:</b>	Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code



**COMMISSIONERS**  
DOUG LITTLE - Chairman  
BOB STUMP  
BOB BURNS  
TOM FORESE  
ANDY TOBIN



JONI JERICH  
Executive Director

PATRICIA L. BARFIELD  
Director  
Corporations Division

**ARIZONA CORPORATION COMMISSION**

MASTERCRAFT DEALER SERVICES, LLC  
CORPORATION SERVICE COMPANY  
2338 W ROYAL PALM RD  
STE J  
PHOENIX, AZ 85021

Effective Date: 03/10/2016  
File No: R-2073077-5

We have received a document submission for the above-referenced entity. If an acceptable form of payment for the correct filing fee was received, it has been deposited and is nonrefundable pursuant to statute, unless otherwise noted below. The document is **REJECTED** and is being returned for the following reasons:

The filing fee has been deposited.

--Mark the "Entity as Statutory agent" box below signature line of the Statutory agent acceptance attachment.

Review, correct and re submit ALL documents.

**IMPORTANT INFORMATION:**

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 (all pages must be legible):

1. A copy of this letter;
2. All pages of the rejected document with corrections OR a complete, signed, corrected document;
3. A NEW cover sheet indicating resubmission; and
4. Any additional paperwork or filing fees, as requested within



this letter.

If you do not owe any additional fees or are paying by MOD account you can email your resubmission packet as a pdf document attachment to [documentintake@azcc.gov](mailto:documentintake@azcc.gov).

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 <http://ecorp.azcc.gov>. USE THE SERVICE FEATURE AND SELECT "SUBSCRIBE TO EMAIL REMINDER TO FILE ANNUAL REPORT." YOU CAN ALSO SUBSCRIBE USING THE SEARCH FEATURE TO FIND YOUR CORPORATION'S RECORD, THEN CLICK ON THE BUTTON FOR "ANNUAL REPORT EMAIL REMINDERS." IF YOU CHOOSE NOT TO SUBSCRIBE, YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

Tell us how we are doing. Take the online customer service survey at [www.azcc.gov/divisions/Corporations](http://www.azcc.gov/divisions/Corporations).





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MAR 11 2016

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISIONCALLISTER NEBEKER  
& McCULLOUGH  
*Attorneys at Law*ZIONS BANK BUILDING, SUITE 900  
10 EAST SOUTH TEMPLE  
SALT LAKE CITY, UTAH 84133  
TELEPHONE (801) 530-7300  
FAX (801) 364-9127

## FACSIMILE COVER SHEET

DATE: March 11, 2016

DELIVER TO:

NAME/COMPANY	FAX NO.
Arizona Corporations Division	602-542-4100

SENDING PARTY:	Paul H. Shaphren
CLIENT/MATTER NAME:	MasterCraft Dealer Services, LLC
CLIENT/MATTER NUMBER:	13716.9
NUMBER OF PAGES, INCLUDING COVER:	8

## MESSAGE:

Attached to this fax are the corrected pages necessary for filing MASTERCRAFT DEALER SERVICES, LLC as a new entity to conduct business in Arizona. This is to correct papers received by Fedex by your office on March 2, 2016. Please call Mr. Shaphren's secretary Anne at 801-530-7413 or email at [ajanssen@cnmlaw.com](mailto:ajanssen@cnmlaw.com) if there are any additional problems. Thank you.

ORIGINAL DOCUMENT:	<input type="checkbox"/> WILL FOLLOW	<input checked="" type="checkbox"/> WILL NOT FOLLOW
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This Facsimile may contain PRIVILEGED AND CONFIDENTIAL INFORMATION intended only for the use of the Addressee(s) named above. If you are not the intended recipient of this facsimile, or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by telephone and return the original facsimile to us at the above address via the U.S. Postal Service. Thank you.

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL (801) 530-7300.



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ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

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## ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

**COVER SHEET****USE A SEPARATE COVER SHEET FOR EACH DOCUMENT****1. WHAT ARE YOU FILING?**☒ New Entity    ☐ Change to existing entity    ☐ Re-submission/Correction**2. ENTITY NAME:**

Mastercraft Dealer Services, LLC

**3. CALCULATE YOUR FEES** (copies, certificate of good standing and expedited processing are all optional):

Document filing fee (fees are listed on the bottom of the form or on the fee schedule)	Subtotal:	\$150.00
Do you want EXPEDITED processing? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO    If YES, add \$35.00	Subtotal:	\$35.00
<input type="checkbox"/> Corporation certified copies \$ 5.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> LLC certified copies \$10.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> Certificate of Good Standing \$10.00 each x (enter number of copies requested)	Subtotal:	
<b>TOTAL YOUR AMOUNT OWED</b>	<b>TOTAL AMOUNT DUE:</b>	<b>\$185.00</b>

**4. PAYMENT METHOD:**☐ MOD Account #**Cash** - do not mail cash. Cash may be used only for in-person submittals.**Checks or money orders** - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. **UNACCEPTABLE CHECKS** include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or check numbers; temporary checks (new accounts).**Credit cards** - may be used for in-person submittals, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa, MasterCard, and American Express.**5. REQUIRED - RETURN DELIVERY OPTION** (PLEASE PRINT CLEARLY and select only ONE):

<input checked="" type="checkbox"/> Email	Email address: phshaphren@cnmlaw.com		
<input type="checkbox"/> Pick up	Name:	Phone:	
<input type="checkbox"/> Mail	Name:		
	Address:		
	City:	State:	Zip:
	Phone:		

**DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)****FOR ARIZONA CORPORATION COMMISSION USE ONLY**

PICK-UP BY: \_\_\_\_\_

DATE: \_\_\_\_\_

View current processing times at: [www.azcc.gov/Divisions/Corporations/document-processing-times.pdf](http://www.azcc.gov/Divisions/Corporations/document-processing-times.pdf)

