## ARIZONA CORP COMMISSION

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JUN 15 2016

AZ Corp. Commission 05546516

MAY 2 7 2016

FILE NO. L-2095779-Z

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

				WKITCES						
4	<b></b>			Read	the Inst	ructions	L010i			
1.	ENT	TITY TYPE - c	heck o	nly one to indi	cate the	type of a	entity haino	farm	J.	
	[		uiiuun	PANY						
٠		(entity name must the words "Limite	of Linking			(cucity time)	ONAL LIMITED must contain th	M Monde		
_		Company" or "11(	(**)			"Profesions	i Limited Liability	Company		
2.	ENT	ITY NAME – <u>s</u>	ee Instru	ctions LO10) for f	uli namin	o recuire				
	/	IDB Co	incla	metican	110	a .edmi.e	meiris – give	tne exa	ct name of t	he LL(
3.			113/19	uction,	<u> </u>					
3.	Checks	ressional Li	MITED	LIABILITY CO	MPANY	SERVI	CES - Hand	00k. 15 m		
	firm, p	ccounting, medical	ve, descri ):	be the professional	services t	hat the pro	ressional LLC v	villy is provi	roressional LLI de ( <i>example</i> s:	Cis : Inw
								-		
4.						· · · · · · · · · · · · · · · · · · ·				
<b>4.</b> 3	AI	UTORY AGEN	for se	rvice of proce	<b>SS - Sec</b>	Instruc	ions LO10i		,	<del></del> .
•					4	.2 OP71	OAAL - mailing	1 Address	h Ashaa-	
	,	an Arizona residen entity) <b>and phys</b> ic	78 / / Principles			of St	stutory Agent (	Can be a	P.O. Box):	
		P.O. Box) in Arizon	a of the st	tatutory agent:					-	
NA	gra	lya Gu	, k					<u>-</u>		hallen,
<b>tatute</b> ry	Agent R	ame			┥					
tention	(optional	<b>)</b>			<u> </u>				•	
100	25	w San	dea	Terra	Attention (	ptional)			<u></u>	
Gress 1				_ / C_ICICER	Address 1					
	(optional		1 45				·			
$p_H$	100	nix	AZ State	20 85023	Address 2 (c	ptional)		AZ		
4.3	REQU	IRED~ the Statuto			City			State	Zap	
			7 DVEIIL A	cceptance form MC	02 must b	e submitte	d along with t	iese Arti	its of Organi	zation.
AF	10ZIS	MA KNOWN PL	ACE OF	BUSINESS A	DDPESS		<del>-</del>	·	····	
5.	1 Is	the Arizona kr	iowa nia	ice of huninass		·•				
	St	atutory agent?	TQ <sup>*</sup> Y	ice of business es – go to num	auoress ber 6 an	ine samı d contin	e as the <b>stn</b>	eet ad	dress of th	æ
				<b>3</b>			JE			
5,2	l If	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.								
	Bo	ox) of the know	n place	of business of	ive the p	hysical	or street a	ddres	onot a P.(	D.
	[				THE LLC	П Arizon	ð:			
	Ĺ							•••••••••••••••••••••••••••••••••••••••	<del></del>	$\neg$
	[ ]	Ittention (optional)			· · · · · · · · · · · · · · · · · · ·			·		
	<u> </u>	ddress 3								
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	^	ddress 2 (optionel)			<del></del>		<del> </del>			_
		GY .				AZ				1
	La	ountry	U.S.A.			State or Province	Zip			$\neg$
										- 1

6. DURATION - if the duration or life persection and continue to number 7 or number corresponding blank:	riod of Imber 8	the LLC is perpetual (forever), then skip this . Otherwise, check only one box below <i>and</i> fill in
The LLC's life period will end on this da	Man e	
The LLC's life period will end upon the	occurrenc	e of this event: (describe an event)
CVINDBINY and complete and second out of	ctions i gers (m	010i - check this box [if management of the eaning one or more managers will run the nager Structure Attachment form LO40. (Both
9. ORGANIZERS and SIGNATURE - the Indist the Organizer - list the name of the Organizer - list the name of the Organizer.	therwise obers w t is sub- ividual o nizer be	or pre-existing entity submitting this document the company together if the property of the member of the member structure the attachment.
The person signing below declares a that the information contained with attachments is true and correct, and Arizona law.	ind certi	les under pensity of parismy
Organizer: Natalya Guk		
Signature  NATALYA Guk  Printed Name (if different to the control of the control	•	05-27-2016 Date
(a saideak non Organizer)		
Filing Fee: \$50.00 (regular processing) Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.  The same be advised that A.C.C. forms reflect only the minimum provisions required by at a individual needs of your business.  Idocuments filed with the Artisona Corporation Commission are multiple.	Mail:	Arizona Corporation Commission Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 602-542-4100

All documents filed with the Arizone Corporation Commission are public record and are open for public inspection. If you have questione after reading the Enstructions, please call 602-542-3025 or (within Arizone only) 800-345-5819.

L010.002 Rev: 2014

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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):  NDB Construction, LLC
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- 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 form.</u>

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<del></del>	<del></del>			
		Name		
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Province	Zip	City	State or Province	Zip
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		Address 1		
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Province	Zlp	City	State or Province	Zip
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a Guk		3.		
	State or Province	State or Province  State or Province  State or Province	Sand Da Terrela Name  Address 1  A2 85023  Address 2 (optional)  City Country  Address 1  Address 2 (optional)  State or Province  Address 2 (optional)  State or Province  Address 3  Address 2 (optional)  State or Province  Address 3  Address 3  Address 1  Address 1  Address 1  Address 1  Address 2 (optional)	Address 2 (optional)  State or Province  Country  Name  Address 1  Address 2 (optional)  State or Province  Country  Address 3  Address 3

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## STATUTORY AGENT ACCEPTANCE

Please	read Instructions <u>M002i</u>
statutory agent, e.g., Articles of Organization	Arizona of the corporation or LLC that has appointed the hame as listed on the document appointing the on or Article of Incorporation):
- NDB Constaucti	on LLC.
must match exactly the statutory agent na	ect name of the Statutory Agent appointed by the either an individual or an entity). NOTE - the name me as listed in the document that appoints the on or Articles of Organization), including any middle
3. STATUTORY AGENT SIGNATURE:	
By the signature appearing below, the individ accepts the appointment as statutory agent for acknowledges that the appointment is effective agent or the statutory agent resigns, whichever	or the entity named in number 1 above, and
	96 under normby of made in the the late well an
Bouture Nata	lya Guk 05-27-2016
REQUIRED - check only one:	Farne Dete
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.  Fex	1300 W. Washington St., Phoenix, Artzona 85007 : 602-542-4100
Please be advised that A.C.C. forms reflect only the minimum provisions required by the IndAddual needs of your business. All documents filled with the Artzone Corporation Commission are public record and a if you have questions after reading the Instructions, please call 602-542-3026 or (with	

M002,603 Rev: 9/2014