ARIZONA CORP COMMISSION FILED

JUL 26 2016
FILE NO. L-2110132-3



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

			ARTICL	ES OF	ORGANIZ	ATIC	N		
			Rea	ad the I	nstructions L	01 <i>0</i> i			
1.	L. ENTITY TYPE - check only one to indicate the type of entity being formed:								
	¥	LIMITED LIABILITY ((entity name must cont the words "Limited Liab Company" or "LLC")	aln		PROFESSIO (entity name "Professional "PLLC")	must cor	ntain the wo	rds	OMPANY
2.	ENTITY NAME – see Instructions <u>L010i</u> for full naming requirements – give the exact name of the LLC: PIZZA INVESTMENT, 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.	STAT	TUTORY AGENT f	or service of p	rocess	- see Instruc	ctions	L010i		
	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:			red (not a	4.2 OPTIONAL - mailing address in Arizona of Statutory Agent (can be a P.O. Box):				
	rt J. Cal								
	Itention (optional) 1017 S. 1st Avenue			,	Attention (optional)			•	
Addr	ess 1			*	Address 1				. ,
	ess 2 (option	•	AZ State Zip 85552		Address 2 (optional)			AZ State	Zip
	4.3 RE	EQUIRED— the Statutor	y Agent Acceptance	form M00	2 must be subm	nitted al	ong with t	hese Arti	cles of Organization
5.	ARI2 5.1	ZONA KNOWN PL Is the Arizona kr statutory agent?	nown place of bu	siness a to numb	ddress the s	itinue		reet ad	dress of the
	5.2	If you answered Box) of the know						addres	ss (not a P.O.
•		Attention (optional)						· <u>-</u> ·	
;		Address 1	 · · · ·		 		· · · ·		· · · · · · · · · · · · · · · · · · ·
		Address 2 (optional)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		City Country	U.S.A.			te or vince	Zip		

	of the LLC is perpetual (forever), then skip this er 8. Otherwise, check only one box below <i>and</i> f	
The LLC's life period will end on this date:	(enter a date)	
The LLC's life period will end upon the occur	•	
COMPLETE NUMBER 7 OR NUMBER	B – NOT BOTH.	
LLC will be vested in a manager or manage company) and complete and attach ONLY t	ions L010i – check this box if management of the control of the c	e Both
LLC will be reserved to the members (mean there is no operating agreement stating other	ns L010i - check this box lift management of the ning all members will run the company together therwise), and complete and attach ONLY the Members will be listed on the Member Structure is submitted without the attachment.	r if
is the Organizer - list the name of the Orga	ividual or pre-existing entity submitting this doc inizer below. If the Organizer is an individual, the r is a pre-existing entity, provide the signature the individual's name.	nat
	and certifies <i>under penalty of perjury</i> nin this document together with any id is submitted in compliance with	
Organizer: LegalZoom.com, Inc., A Delaware Corpo	oration	
104		, •
Signature	Date Date	<u></u>
Cheyenne Moseley, Assistant Secretary		
Printed Name (if different from Organizer)		<u>_</u>
•		
Filing Fee: \$50.00 (regular processing)	Mall: Arizona Corporation Commission Corporate Filings Section	
Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.	1300 W. Washington St., Phoenix, Arizona (Fax: 602-542-4100	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.

60 not write above this line; reserved for act use only.

STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

	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): PIZZA INVESTMENT, LLC					
	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:					
	Bart J. Center					
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.						
1	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 iaw. Bart J. Carter					
Elgox	Bart J. Carter 7 - 2 J. //					
REQ	UIRED - check only one:					
-	Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.					
Expa	g Fee: none (regular processing) Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Eas are nonrefundable - see Instructions. Fax: 502-542-4100					
All socur	the edvised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may perture statutes and your business. The statute reeds of your business. The statute reeds of your business. The statute reeds of your business. The statute countries are public record and are open for public inspection. The statute countries are statuted by the instructions, please call 602-843-8036 or (within Arzons only) 800-845-8819.					

60(62.0)3 Parv. 9(2)14

Assure Corporation Granulation – Corporations Director Page 1 of 1

BART J CARTER

07/21/2016 07:14AM 9283488928

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

MEMBER STRUCTURE ATTACHMENT

1.	tate or country):							
2.	A.C.C. FILE NUMBER (if known):								
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 <u>Attachment</u> form.	and address o	of all Membe r	rs. If more	e space is needed, use a	another <u>Membe</u>	r Structure		
Bart J. and Vicki E. Carter				Bryce J. and Danielle Daley Carter					
Name	? 7 S. 1st Avenue			Name 1017 S. 1st Avenue					
Address 1				Address 1					
	ess 2 (optional)	\	05550	Address 2		Arizono	95559		
City	tcher 	Arizona - State or	85552 Zip	Thatch	er	Arizona State or	85552 Zip		
Count	Province		,	Country					
-						-			
Name				Name					
Address 1				Address 1					
Addre	ess 2 (optional)			Address 2	(optional)				
City		State or Province	Zip	City		State or Province	Zip		
Count	try			Country		110411.20			
Name			Name						
Addre	255 1			Address 1			•••		
Addre	ess 2 (optional)			Address 2	(optional)				
City		- State or Province	Zip	City		State or Province	Zip		