ARIZONA CORP. COMMISSION FILED

AZ Corp. Commission

APR 2 5 2017

FILE NO. L. 2181195-2

-		IS LINE; RESERVED FOR ACC USE ONLY.		
		F ORGANIZATION		
	Read the	e Instructions <u>L010i</u>		
1.	ENTITY TYPE - check only one to indicate	e the type of entity being for	med:	
	(entity name must contain the words "Limited Liability Company" or "LLC")	PROFESSIONAL LIMITED LIAI (entity name must contain the wi "Professional Limited Liability Coi "PLLC")	ords	
2.	ENTITY NAME - see Instructions L010i for full	naming requirements – give the	e exact name of the LLC:	
	Sears Canada, LLC			
3.	PROFESSIONAL LIMITED LIABILITY CON checked in number 1 above, describe the professional sefirm, accounting, medical):	MPANY SERVICES — if and on ervices that the professional LLC will	nly if professional LLC is I provide (examples: law	
4.	STATUTORY AGENT for service of proces	s – see Instructions 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:	4.2 OPTIONAL – mailing address in Arizona of Statutory Agent (can be a P.O. Box):		
3rac	lley P. Miller			
	tory Agent Name	-		
	N-7 K			
	tion (optional) V. Cushing Street	Attention (optional)		
Addre		Address 1		
Addra	ess 2 (optional)			
	Tucson AZ 85701	Address 2 (optional)	AZ	
		City	State Zip	
	4.3 REQUIRED— the Statutory Agent Acceptance form M	002 must be submitted along with t	hese Articles of Organization.	
5.		s address the same as the str mber 6 and continue mber 5.2 and continue give the physical or street		
	Attention (optional)			
	6340 N. Campbell Avenue, Sutie 278 Address 1			

Address 2 (optional)

U.S.A.

Tucson

City Country ΑZ

State or Province 85718

6. DURATION – if the duration or life period of the LLC is perpetual (foresection and continue to number 7 or number 8. Otherwise, check only of the corresponding blank:	ver), then skip this ne 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 occurrence of this event: (describe an ev	
COMPLETE NUMBER 7 OR NUMBER 8 - NOT BOTH.	
7. MANAGER-MANAGED LLC - see Instructions L010i - check this box LLC will be vested in a manager or managers (meaning one or more macompany) and complete and attach ONLY the Manager Structure Attach members and managers will be listed on the Manager Structure Attach rejected if it is submitted without the attachment.	nagers will run the ment form L040. (Both
8. MEMBER-MANAGED LLC - <u>see Instructions L010i</u> - check this box it LLC will be reserved to the members (meaning all members will run the there is no operating agreement stating otherwise), and complete and a <u>Structure Attachment form L041</u> . (All members will be listed on the Mem Attachment.) The filing will be rejected if it is submitted without the attachment.	company together if ttach ONLY the <u>Member</u> nber Structure
9. ORGANIZERS and SIGNATURE - the individual or pre-existing entity is the Organizer - list the name of the Organizer below. If the Organizer individual must sign below. If the Organizer is a pre-existing entity, provindividual acting for that entity, then print the individual's name.	is an individual, that
The person signing below declares and certifies under penalty of pethat the information contained within this document together with attachments is true and correct, and is submitted in compliance with Arizona law.	any
Organizer: Bradley P. Miller	
mm -	04/25/2017
Signature	Date
Printed Name (if different from Organizer)	
	,

Filing Fee: \$50.00 (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 602-542-4100 Fax:

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.

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

STATUTORY AGENT ACCEPTANCE

	Please	e read 1	nstructions <u>M002i</u>		
Statutory Agent (this m	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): Sears Canada, LLC				
2. STATUTORY AGENT N entity listed in number i must match exactly the statutory agent (e.g. Ar initial or suffix:	1 above (this will b e statutory agent n	e <i>either</i> ame as	an individual or ar listed in the docur	n entity). <i>NOTE</i> - the	he name the
Bradley P. Miller	Bradley P. Miller				
3. STATUTORY AGENT S	STATUTORY AGENT SIGNATURE:				
By the signature appear accepts the appointmen acknowledges that the a agent or the statutory a	t as statutory agen appointment is effe	t for the	e entity named in r til the appointing e	number 1 above, a	nd statutory
The person signing belo contained within this do submitted in compliance	cument together w	tifies <i>ur</i> ith any	nder penalty of per attachments is tru	iury that the inform e and correct, and	nation is
MN	/	•	P. Miller		04/25/2017
Signature	P	rinted Name			Date
REQUIRED - check only on	e :				
signing on behalf of my (natural person) named	self as the individua	al t.	behalf of the ent	ory agent: I am ity named as statu zed to act for that	tory agent,
Filing Fee: none (regular processi Expedited processing – not applica All fees are nonrefundable - see In	ble.	Mail: Fax:		ommission - Corporate St., Phoenix, Arizona 8	
Please be advised that A.C.C. forms reflect only	the minimum provisions requi	lred by statu	to You should eask private to	ral councel for these matters th	

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MEMBER STRUCTURE ATTACHMENT

ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country): Sears Canada, LLC
A.C.C. FILE NUMBER (if known):

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.

Doron Sears			2.		
Name			Name		
6340 N. Campbell Avenue, Suite 278					
Address 1			Address 1		
Address 2 (optional)		T	Address 2 (optional)		
Tucson	AZ	85718			
City UNITED STATES	State or Province	Zip	City	State or ZIp Province	
3.	,		4.		
Name			Name		
Address 1	<u> </u>		Address 1		
			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State or	Zip	City	State or Zip	
Country	Province		Country	Province	
5.			6.		
Name			Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
-			Address 2 (optional)		
City	State or	Zip	City	State or Zip	
Country	Province		Country	Province	
7.			8.		
Name			Name		
Address 1		Address 1			
Address 2 (optional)			Address 2 (optional)		
			Address 2 (optional)		
City	State or Province	Zip	City	State or Zlp	
Country	FIOVINCE		Country	Province	

RECEIVED

APR 2 5 2017

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

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ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT ** ORDER COPIES USING A RECORDS REQUEST FORM **

WHAT ARE YOU FILING?						
✓ New Entity ☐ Change to existing entity ☐ Re-submission of rejected filing						
ENTITY NAME - give the exact name of the corporation as currently shown in A.C.C. records:						
Sears Canada, LLC						
EXPEDITED PROCESSING?						
✓ YES - add \$35 to the filing fee NO - pay only the filing fee						
Document filing fees are listed on the bottom of each form or on the fee schedule on our website, http://ecorp.azcc.gov, under the FAQs.						
PAYMENT:						
✓ MOD Account #: 1849 Total amount to deduct: \$85.00 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.						
REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):						
Email address: julie@bpmpc.net	Email address: julie@bpmpc.net					
Phone:	7 -					
Mail Name:						
Address:						
City: State: Zip:						
Phone:	\neg					
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