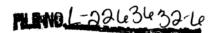
FEB 2 2 2018





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ARTICLES OF ORGANIZATION

	Read the Instructions <u>L010i</u>									
1.	ENTITY TYPE - check only one to indicate the type of entity being formed:									
	•	LIMITED LIABILITY Co (entity name must conta the words "Limited Liabil Company" or "LLC")	in	((entity n	SSIONAL LIN ame must co ional Limited	ntain the wo	rds	DMPANY	
2.	ENTI	ENTITY NAME – see Instructions L010i for full naming requirements – give the exact name of the LLC:								
	SWIFTCONNECT, 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):									
							140.00			
4.		UTORY AGENT fo	r ser	vice of process						
	4.1	REQUIRED – give the an Arizona resident or entity) and physical (P.O. Box) in Arizona o	an Ariz or stre	ona-registered et address (not a	4.2	OPTIONAL of Statutor	– mailing a y Agent (ca			
C. J	EFF K	EEME								
Statu	tory Agent	Name								
Atten	tion (optio	nal)			Attention (option	nal)				_
		GESIDE AVE								_
Addre	ess 1				Address 1					
Addre	ess 2 (optio		ΑZ	85748	Address 2 (option	onal)		AZ		_
City ₄	TUCS	SON	State	Zip	City			State	Zip	
	4.3 RE	<i>QUIRED</i> — the <u>Statutory</u>	Agent	Acceptance form M	002 must be s	submitted a	long with th	nese Arti	cles of Organizatio	n.
5.	ARIZ	ONA KNOWN PLA	ACE O	F BUSINESS A	DDRESS:					
	 Is the Arizona known place of business address the same as the street address of the statutory agent? Yes - go to number 6 and continue No - go to number 5.2 and continue 									
	5.2	If you answered Box) of the know						addres	SS (110t a P.O.	7
		Attention (optional)								1
		Address 1	-							1
		Address 2 (optional)				AZ				1
		City Country	U.S	5.A.		State or Province	Zip		MATERIA (1)	1

6.	section	ION - if the duration or life period of the LLC is perpand continue to number 7 or number 8. Otherwise, cesponding blank:		
		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 event)	
co	OMPLE	TE NUMBER 7 OR NUMBER 8 – NOT BOTI	н.	
7.	LLC will compar membe	GER-MANAGED LLC - see Instructions L010i - chec I be vested in a manager or managers (meaning one my) and complete and attach ONLY the Manager Structure ers and managers will be listed on the Manager Structure and if it is submitted without the attachment.	or more managers will run the cture Attachment form L040. (Both	
8.	LLC will there is Structu	ER-MANAGED LLC – <u>see Instructions L010i</u> – check I be reserved to the members (meaning all members in operating agreement stating otherwise), and control of the reserved to the members will be listed ment.) The filing will be rejected if it is submitted with	will run the company together if mplete and attach ONLY the Member on the Member Structure	
9.	9. ORGANIZERS and SIGNATURE - the individual or pre-existing entity submitting is the Organizer - list the name of the Organizer below. If the Organizer is an individual must sign below. If the Organizer is a pre-existing entity, provide the individual acting for that entity, then print the individual's name.			
		The person signing below declares and certifies under that the information contained within this document to attachments is true and correct, and is submitted in co Arizona law.	ogether with any	
Or	ganizer:	C. JEFF KEEME		
	16	14	2/16/18	
Sig	nature		Date	
Pri	nted Name	(if different from Organizer)		

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 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.

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MEMBER STRUCTURE ATTACHMENT

1.	ENTITY NAME - give the exact hame of the LLC (lotely) LLCs - give hame in domiche state of country).						
	SWIFTCONNECT, 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.

I. C. JEFF KEEME Name 490 S. EDGESIDE AVE Address 1 Address 2 (optional) TUCSON City Country UNITED STATES State or Province Jup Province State or Province State or Province AZ State or Province	JOHN PETERSON Name 10761 E. VIA TRANQUILLA Address 1 Address 2 (optional) TUCSON City Country UNITED STATES ALLISON L. KEEME
Address 2 (optional) TUCSON AZ State or Province 3. KEVIN WEBB	10761 E. VIA TRANQUILLA Address 1 Address 2 (optional) TUCSON City Country UNITED STATES AZ State or Province Zip Province
Address 1 Address 2 (optional) TUCSON AZ State or Province 3. KEVIN WEBB	Address 1 Address 2 (optional) TUCSON City Country UNITED STATES AZ State or Province Province
Address 2 (optional) TUCSON AZ City Country UNITED STATES State or Province Zip Province 3. KEVIN WEBB	Address 2 (optional) TUCSON City Country UNITED STATES AZ State or Province Zip Province
TUCSON AZ 85748 City UNITED STATES State or Province 2ip	TUCSON AZ 85749 City UNITED STATES State or Province Province
TUCSON AZ 85748 City UNITED STATES State or Province 2ip	TUCSON AZ 85749 City UNITED STATES State or Province Province
City UNITED STATES State or Province Country VNITED STATES State or Province Province	City State or Zip Province Country 4.
Country UNITED STATES Province 3. KEVIN WEBB	Country UNITED STATES Province
3. KEVIN WEBB	4.
KEVIN WEBB	
Name	, , <u></u>
Herric	Name
9835 EAST WIND DANCER DRIVE	490 S. EDGESIDE AVE
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
TUCSON AZ 85748	TUCSON AZ 85748
City State or Zip Province	
Country	Country
5.	6.
Name	Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City State or Zip	City State or Zip Province
Country	Country
Province	Country 1
Country Province 7.	8.
Country	
Country 7. Name	Name
Country Province 7.	8.
Country 7. Name	Name
Country 7. Name Address 1	Name Address 1
Country 7. Name Address 1	Name Address 1
City UNITED STATES State or Province Province State or Province Zip Province Address 1 Address 1 Address 2 (optional)	City UNITED STATES State or Province 6. Name Address 1 Address 2 (optional) City State or Zip Province

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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 ** ORDER COPIES USING A RECORDS REQUEST FORM **

WHAT ARE YOU FILING?							
✓ New Entity	✓ New Entity ☐ Change to existing entity ☐ Re-submission of rejected filing						
ENTITY NAM	ENTITY NAME - give the exact name of the corporation as currently shown in A.C.C. records:						
SWIFTCONNE	SWIFTCONNECT, LLC						
EXPEDITED PROCESSING?							
☐YES - add \$35 to 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:	PAYMENT:						
☐ MOD Acco	☐ MOD Account #: Total amount to deduct:						
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 Email address: JEFF@GETCLEARWAVE.COM						
☐ Pick up	Name:		Phone:				
Mail Name: C. JEFF KEEME							
	Address: 490 S. EDGESIDE AVE						
	city: TUCSON	State: AZ	zip: 85748				
	Phone: 520-302-0362						
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