Glear Form



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

APPLICATION FOR REGISTRATION OF FOREIGN LIMITED LIABILITY COMPANY

Please read Instructions L025i

		1,000						
1.	ENTITY TYPE - check only one to indicate the type of entity applying for registration:							
	X LIMITE	ED 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:							
	APPLE ROOF	FING, 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	— and ditions — go to						
	3.2 · 🗍	formation is not availa	eck this if the foreign LLC's name in its state or country of ble for use in Arizona or if that name does not contain an LLC se name in number 3.3 below. NOTE – a resolution of the fictitious name must be attached to and submitted with this					
	3.3 If	you checked 3.2, ente	r or print the name to be used in Arizona:					
4.	in number :	ONAL LIMITED LIABI 1 above, describe the pr law firm, accounting, m	LITY COMPANY SERVICES – if professional LLC is checked rofessional services that the professional LLC will provide nedical):					
5.	FOREIGN I	DOMICILE – list the sta	ate or country in which the foreign LLC was formed:					
6.	DATE OF FORMATION IN FOREIGN DOMICILE: 09/19/2011							
7.	foreign LLC	OR GENERAL CHARAC For the general character ruction repair/replace/new	CTER OF BUSINESS – describe or state the purpose of the er of the business it proposes to transact in Arizona:					

8. STATU	TORY AGENT	IN ARI	ZONA:				
a <i>o</i>	REQUIRED – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL - Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):			
C T Corporati	on System						
Statutory Agent Na	ame (required)						
Attention (optional)	entral Avenue, Sui	to 460		Attention (optional)		
Address 1	entrai Avenue, Sui	16 400	ASSESSED	Address 1			
Address 2 (optional	I)			Address 2	optional)	T	T
City Phoenix			zıp 85012	City		State	Zip
	<i>REQUIRED</i> – th this Application			<u>stance</u> fo	rm M002 must be s	ubmitte	d along with
mainta		e of orga	anization, or, if n		P. O. Box) of the fore		
	Attention (optional) 4833 N 32ND 5	ST					
	Address 1						
	Address 2 (optional) LINCOLN				NE	68:	504
	City	ED STA	TES		State or Province	Zip	
10. OPTIO 10.1		a known	it? 🗌 Yes - g	ss street o to the	ess ADDRESS: address the same a next page and conti number 10.2 and co	nue.	
10.2			" to number 10. ace of business of		ne physical or street C in Arizona:	addres	s (not a P.O.
	Attention (optional)			· ····································			
	Address 1						
	Address 2 (optional)						
	City		:		State or Province	Zip	
	200						

COMPLETE NUMBER 11 OR NUMBER 12 - NOT BOTH.

MANAGER-MANAGED LLC - see Instructions L025i - check this box ☐ if management of 11. the LLC is vested in a manager or managers, and complete and attach the Manager Structure Attachment form L040. The filing will be rejected if it is submitted without the attachment. MEMBER-MANAGED LLC - see Instructions L025i - check this box ⋈ if management of the LLC is reserved to the members, and complete and attach the Member Structure Attachment form LO41. The filing will be rejected if it is submitted without the attachment. By checking the box marked "I accept" below, I acknowledge under penalty SIGNATURE: 13. of law that this document together with any attachments is submitted in compliance with Arizona law. X I ACCEPT Dustan L. Biegler 08/03/2018 Printed Name REQUIRED - check only one and fill in the corresponding blank if signing for an entity: I am a duly authorized I am a Member of this member-I am the individual Manager of this agent for this LLC. manager-managed LLC or I am managed LLC or I am signing for an signing for an entity manager entity member named: named:

Filing Fee: \$150.00 (regular processing)		Arizona Corporation Commission - Corporate Filings Section
Expedited processing - add \$35.00 to filing fee.	- 1	1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	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 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.

MEMBER STRUCTURE ATTACHMENT

1.	ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country): APPLE ROOFING, LLC								
2.	A.C.C. FILE NUMBER (if Find the A.C.C. file number on	known): the upper corne	er of filed docur	nents OR on our website at: http://www.	azcc.gov/Divisio	ons/Corporations			
3.	MEMBERS – give the nam <u>Attachment</u> form.	ne and address	of all Memb	ers. If more space is needed, use a	nother <u>Memb</u>	er Structure			
1.	And I. Dinalan			2.					
Nam	tan L. Biegler			Marcus F. Kuhlmann					
	l NW 6th St			7411 SW 29th St					
	ess 1			Address 1					
Addr	ress 2 (optional)	T		Address 2 (optional)	T				
Lin	coln	NE	68521	Lincoln	NE	68516			
City	UNITED STATES	- State or Province	Zip	City UNITED STATES	- State or Province	Zip			
3.				4.					
Nam	e			Name					
Addr	ess 1			Address 1					
Addr	ess 2 (optional)			Address 2 (optional)	<u> </u>	T .			
City	1	State or Province	Zip	City	- State or Province	Zip			
Cour	ntry I	:		Country 6.					
-				ľ					
Name				Name					
Address 1				Address 1		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Addr	ress 2 (optional)			Address 2 (optional)					
City	A second	· State or	Zip	City	State or	Zip			
Cour	ntry	Province		Country	Province				
7.				8.					
Nam	e			Name					
Addr	ess 1			Address 1	MARKET,				
Addr	ess 2 (optional)			Address 2 (optional)					

State or Province

Country

Province

Clear Form

Print Form

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

STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

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): Apple Roofing, 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 <i>either</i> an individual or an entity). <i>NOTE</i> - 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:						
	C T Corporation System						
3.	By the signature appearing below accepts the appointment as statut acknowledges that the appointme agent or the statutory agent resign The person signing below declared contained within this document to submitted in compliance with Arizona.	, the indivitory agent int is effections, whiches ins, whiches and certiogether with	for tive ever ifies	the entity named in number until the appointing entity occurs first. under penalty of perjury	per 1 above, and y replaces the statutory that the information		
7	OD Kaarran	Ternell K	Cearn	ey, Assistant Sec.	08/06/2018		
Sig	ernell Kearney	Pri	nted N	lame	Date		
RE	QUIRED - check only one:						
	Individual as statutory agent: signing on behalf of myself as the (natural person) named as statut	myself as the individua		behalf of the entity n	agent: I am signing on amed as statutory agent, to act for that entity.		
Fi	ling Fee: none (regular processing)		Mai	I: Arizona Corporation Commi 1300 W. Washington St., P	ission - Corporate Filings Section hoenix, Arizona 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

Fax:

602-542-4100

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.

Expedited processing - not applicable.

All fees are nonrefundable - see Instructions.

STATE OF NEBRASKA

United States of America, } ss State of Nebraska }

Secretary of State State Capitol Lincoln, Nebraska

I, John A. Gale, Secretary of State of the State of Nebraska, do hereby certify that

APPLE ROOFING, LLC

was duly formed under the laws of Nebraska on September 19, 2011;

all fees, taxes, and penalties due under the Nebraska Uniform Limited Liability Company Act or other law to the Secretary of State have been paid;

the Company's most recent biennial report required by section 21-125 has been filed by the Secretary of State;

the Secretary of State has not administratively dissolved the company;

the Company has not delivered to the Secretary of State for filing a Statement of Dissolution;

a Statement of Termination has not been filed by the Secretary of State.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

August 3, 2018

Secretary of State

- AUG 06 2018

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

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

08/06/2018

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

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

WHAT ARE YO	U FILING?					
✓ New Entity	Change to existing entity	Re-submission of	rejected filing			
ENTITY NAME	: - give the exact name of the c	orporation as currently	shown in A.C.C. records:			
Apple Roofing,	LLC					
EXPEDITED P	ROCESSING?					
YES - add \$	35 to the filing fee	□ NO - pay only the	filing fee			
Document filir http://ecorp.a	g fees are listed on the bottom zcc.gov, under the FAQs.	of each form or on the	fee schedule on our website,			
			Check 31734616 \$185			
PAYMENT:						
MOD Acco	arre ii i	unt to deduct:				
Checks or mon abbreviations. C include: no impr handwritten or s Credit cards - r online certificate	s of good standing. We accept only Visa	Arizona Corporation Commiss filled out, including the amou of the account holder; no imprombers; temporary checks (ne not for online corporation annua, MasterCard, and American 6	nt sections. UNACCEPTABLE CHECKS inted or preprinted check number; w accounts). ual reports, online name reservations, or express.			
REQUIRED -	RETURN DELIVERY OPTION	(PLEASE PRINT CLEARL)	Y and select only ONE):			
 Email	Email address: CLS-CTPhoenixFulfill	ment@wolterskluwer.co	om			
☐ Pick up	Name:		Phone:			
☐ Mail	Name: C T Corporation System					
	Address:					
·	City:	State:	Zip:			
	Phone:					
L	and the second s		AND CARROW MATERY AND WEEK			
DOCUMENTS \	VILL BE MAILED IF THEY ARE NOT	PICKED UP IN A TIMELY MA	ANNER (APPROXIMATELY ONE WEEK)			
	FOR ARIZONA CORP	ORATION COMMISSION US	SE ONLY			
			DATE:			
PICK-UP B	Y: # 10 - 6 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	20 25年 · 4 年 · 21 日本	DATE:			

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf