

ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: ROB-GLO, LLC
ENTITY ID: 1985246
ENTITY TYPE: Domestic LLC
EFFECTIVE DATE: 05/10/2019
CHARACTER OF BUSINESS: Real Estate and Rental and Leasing
MANAGEMENT STRUCTURE: Member-Managed
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES: N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: THE DENEAU LAW FIRM, PLLC
PHYSICAL ADDRESS: Attn: KINDRA DENEAU, 401 W BASELINE ROAD, SUITE 207,
TEMPE, AZ 85283
MAILING ADDRESS:

KNOWN PLACE OF BUSINESS

1704 W. DAWN DRIVE, TEMPE, AZ 85284

PRINCIPALS

Member: GLORIA MARIA ARELLANO-SIMM - 1704 W. DAWN DRIVE, TEMPE, AZ 85284, USA -
glo3arellano@gmail.com - Date of Taking Office: 05/10/2019

Member: ROBERT SIMM - 1704 W. DAWN DRIVE, TEMPE, AZ 85284, USA - rob.anthony.simm@gmail.com -
Date of Taking Office: 05/10/2019

ORGANIZERS

ROBERT SIMM: 1704 W. DAWN DRIVE, TEMPE, AZ 85284, USA, robert.anthony.simm@gmail.com

SIGNATURES

Organizer: ROBERT SIMM - 05/10/2019

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

ARTICLES OF ORGANIZATION

Read the Instructions [L010i](#)

1. ENTITY TYPE – check only one to indicate the type of entity being formed:

LIMITED LIABILITY COMPANY
 (entity name must contain
 the words "Limited Liability
 Company" or "LLC")

PROFESSIONAL LIMITED LIABILITY COMPANY
 (entity name must contain the words
 "Professional Limited Liability Company" or
 "PLLC")

2. ENTITY NAME – see Instructions L010i for full naming requirements – give the exact name of the LLC:

ROB-GLO, 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. STATUTORY AGENT for service of process – 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):		
THE DENEAU LAW FIRM, PLLC					
Statutory Agent Name					
Attention (optional) 401 W. BASELINE ROAD			Attention (optional)		
Address 1 SUITE 207			Address 1		
Address 2 (optional) City TEMPE		State AZ	Zip 85283		
		State AZ	Zip		
4.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.					

5. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

- 5.1** 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 “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:

Attention (optional) 1704 W. DAWN DRIVE		
Address 1		
Address 2 (optional) TEMPE		State or Province AZ
City		Zip 85284
Country U.S.A.		

6. DURATION – if the duration or life period of the LLC is perpetual (forever), then skip this section and continue to number 7 or number 8. Otherwise, check only one box below *and* fill in the corresponding blank:

The LLC's life period will end on this **date**: _____ (enter a date)

COMPLETE NUMBER 7 OR NUMBER 8 – NOT BOTH.

- 7. MANAGER-MANAGED LLC – [see Instructions L010i](#) – check this box** if management of the LLC will be vested in a manager or managers (meaning one or more managers will run the company) and complete and attach **ONLY** the [Manager Structure Attachment form L040](#). (Both members and managers will be listed on the Manager Structure Attachment.) *The filing will be rejected if it is submitted without the attachment.*
- 8. MEMBER-MANAGED LLC – [see Instructions L010i](#) – check this box** if management of the LLC will be reserved to the members (meaning all members will run the company together if there is no operating agreement stating otherwise), and complete and attach **ONLY** the [Member Structure Attachment form L041](#). (All members will be listed on the Member Structure Attachment.) *The filing will be rejected if it is submitted without the attachment.*

The person signing below declares and certifies *under penalty of law* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.



May 10, 2019

Signature

Date

ROBERT SIMM

Printed Name

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
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.