

**STATE of ARIZONA
ARTICLES of ORGANIZATION
A LIMITED LIABILITY COMPANY**

ARTICLE I.

The type of entity being formed is a limited liability company.

ARTICLE II.

The name of this limited liability company is ZACH OF ALL TRADES LLC.

ARTICLE III.

The name and street address of the statutory agent for service of process is LEGALINC CORPORATE SERVICES INC. at 2 EAST CONGRESS STREET, SUITE 900-126, TUCSON, AZ 85701.

ARTICLE IV.

The street address of the known place of business of the LLC in Arizona is 20 MAVERICK TRL, SEDONA, ARIZONA 86351, in the County of Coconino.

ARTICLE V.

The period of duration of the limited liability company shall be perpetual.

ARTICLE VI.

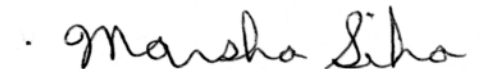
The management of the LLC is reserved to the members; all members will run the company together if there is no operating agreement stating otherwise.

ARTICLE VII.

The limited liability company shall indemnify its directors, officers, employees, members, managers, and agents to the fullest extent provided by the laws of the State of Arizona now or hereafter in force, including the advance of expenses under the procedures provided by such laws.

I, the undersigned, 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 law.

Dated: June 5th, 2019



Marsha Siha, Organizer

Clear Form

Print Form

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):

ZACH OF ALL TRADES 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. **Check one box only to indicate what document the Attachment goes with:**

- ☒ Articles of Organization
 ☐ Articles of Amendment
☐ Application for Registration
 ☐ Articles of Amendment to Application for Registration

4. **MEMBERS** – give the name and address of all **Members**. If more space is needed, use another Member Structure Attachment form.

ZACH HARRISON					
Name			Name		
20 MAVERICK TRL			Address 1		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
SEDONA	AZ	86351	Address 2 (optional)		
City	State or Province	Zip	City	State or Province	Zip
Country	UNITED STATES		Country		
Name			Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State or Province	Zip	City	State or Province	Zip
Country			Country		
Name			Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State or Province	Zip	City	State or Province	Zip
Country			Country		

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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):

ZACH OF ALL TRADES LLC

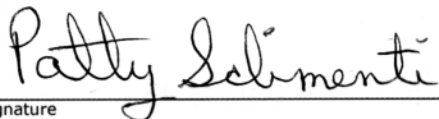
2. **STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

LEGALINC CORPORATE SERVICES INC.

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.

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 law.



Signature

PATTY SCLIMENTI

Printed Name

06/05/2019

Date

REQUIRED – check only one:

- | | |
|--|--|
| <input type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent. | <input checked="" type="checkbox"/> Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity. |
|--|--|

Filing Fee: none (regular processing)
Expedited processing – not applicable.
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.

RECEIVED

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JUN 11 2019

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:

ZACH OF ALL TRADES 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 #: _____ 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):

<input checked="" type="checkbox"/> Email	Email address: EFILE1234@INCFILE.COM		
<input type="checkbox"/> Pick up	Name:	Phone:	
<input type="checkbox"/> Mail	Name:		
	Address:		
	City:	State:	Zip:
	Phone:		

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