

**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 RBH CONSULTING LLC.

**ARTICLE III.**

The name and street address of the statutory agent for service of process is ROBERT HAINES at 8809 S. POINTE PARKWAY E., APT. 1176, PHOENIX, AZ 85044.

**ARTICLE IV.**

The street address of the known place of business of the LLC in Arizona is 8809 S. POINTE PARKWAY E., APT. 1176, PHOENIX, ARIZONA 85044, in the County of Maricopa.

**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:** August 30th, 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):

RBH CONSULTING 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.

ROBERT HAINES							
Name				Name			
8809 S. POINTE PARKWAY E.				Address 1			
Address 1				Address 1			
APT. 1176		AZ		85044		Address 2 (optional)	
Address 2 (optional)		State or Province		Zip		Address 2 (optional)	
PHOENIX		AZ		85044		Address 2 (optional)	
City		State or Province		Zip		Address 2 (optional)	
Country		UNITED STATES				Address 2 (optional)	
Country		State or Province		Zip		Address 2 (optional)	
Country		State or Province		Zip		Address 2 (optional)	
Name				Name			
Address 1				Address 1			
Address 2 (optional)		State or Province		Zip		Address 2 (optional)	
City		State or Province		Zip		Address 2 (optional)	
Country		State or Province		Zip		Address 2 (optional)	
Name				Name			
Address 1				Address 1			
Address 2 (optional)		State or Province		Zip		Address 2 (optional)	
City		State or Province		Zip		Address 2 (optional)	
Country		State or Province		Zip		Address 2 (optional)	

