

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", "LLC" or L.C.)

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

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

Cape Thai Properties, 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 REQUIRED – mailing address in Arizona of Statutory Agent (can be a P.O. Box): <input checked="" type="checkbox"/> Check box if same as physical/street address.	
Gerald Birin			
Statutory Agent Name			
Attention (optional)		Attention (optional)	
1802 E Quiet Canyon Drive			
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City Tucson	State AZ Zip 85718	City	State AZ Zip
4.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.			

5. PRINCIPAL ADDRESS:

5.1 Is the Arizona principal 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, provide the principal address below:

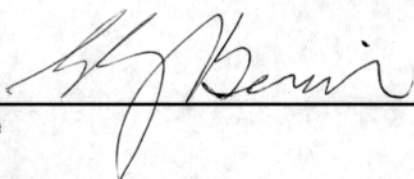
Attention (optional)		
Address 1		
Address 2 (optional)		
City Country	State or Province	Zip

COMPLETE NUMBER 6 OR NUMBER 7 – NOT BOTH.

6. **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.*
7. **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.

Signature



11/12/19

Date

Gerald Birin

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 - Examination 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.

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MANAGER STRUCTURE ATTACHMENT

1. **ENTITY NAME** – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
Cape Thai Properties, LLC

2. **MANAGERS / MEMBERS** – give the name and address of each and every **manager** and list all **members who own 20% or more** of the profits or capital of the LLC. **Use one block per person.** Check the appropriate box or boxes below each person listed. If more space is needed, use another Manager Structure Attachment form.

1. Samuel Gerald Birin Name 1802 E Quiet Canyon Dr Address 1 Address 2 (optional) Tucson City AZ State or Province 85718 Zip Country <input checked="" type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more	2. The Birin Irrevocable Trust Name 16133 Ventura Blvd, Suite 1080 Address 1 Address 2 (optional) Encino City CA State or Province 91436 Zip Country <input type="checkbox"/> Manager <input checked="" type="checkbox"/> Member owning 20% or more
3. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more	4. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more
5. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more	6. Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more

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NOV 18 2019

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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Clear Form

Print Form

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

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 entity as currently shown in A.C.C. records:

Cape Thai Properties, LLC

EXPEDITED PROCESSING?☐ YES - add \$35 to the filing fee ☒ NO - pay only the filing feeDocument 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. We do not accept bills over \$20.00. 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 and MasterCard.*** *PHONE NUMBER REQUIRED FOR ALL RETURN DELIVERY OPTIONS * *****REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):**

<input checked="" type="checkbox"/> Email	Email address: fjohnson@birfam.com		
	Phone number: 520-617-4560		
<input type="checkbox"/> Pick up	Name:		
	Phone number:		
<input checked="" type="checkbox"/> Mail	Name: Felise Johnson		
	Address: 1791 W Dairy Place, Suite 185		
	City: Tucson	State: AZ	Zip: 85705
	Phone number: 520-617-4560		

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: <http://azcc.gov/docs/default-source/corps-files/document-processing-times.pdf>