DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE ONLY.

ARTICLES OF ORGANIZATION

Read the Instructions | 010i

	Read the	Instructions <u>L010i</u>		
1.	ENTITY TYPE - check only one to indicate	the type of entity being	ng formed:	
	(entity name must contain the words "Limited Liability Company", "LLC" or L.C.)	PROFESSIONAL LIMIT (entity name must contai "Professional Limited Liat "PLLC" or "PLC")	ED LIABILITY COMPANY In the words Company,	
2.	ENTITY NAME - see Instructions L010i for full r		ive the exact name of the LLC:	
3.	PROFESSIONAL LIMITED LIABILITY COM checked in number 1 above, describe the professional sefirm, accounting, medical):	PANY SERVICES — if ryices that the professional	and only if professional LLC is LLC will provide (examples: law	
4.	STATUTORY AGENT for service of process	- see Instructions LO)10i	
	4.1 REQUIRED – give the name (can be an Arizona resident or an Arizona-registered of S		EQUIRED – mailing address in Arizona Statutory Agent (can be a P.O. Box): neck box if same as physical/street address.	
Stat	TIBERIU BOCA			
	154 N BUTLER DR	Attention (optional)		
Addi	8502	Address 1		
Addi	ess 2 (optiunar) AZ	Address 2 (optional)	AZ	
City	PHOEN X State Zip	City	State Zip	
	4.3 REQUIRED— the Statutory Agent Acceptance form M	002 must be submitted alon	g with these Articles or Organization.	
5.	PRINCIPAL ADDRESS:			
		me as the street addi mber 6 and continue mber 5.2 and continue	ress of the statutory agent?	
	5.2 If you answered "No" to number 5.1,		3 - 2 '	
	Attention (optional) PHOENIX, 3	TREET 850Z	0	
	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

BOCA

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

602-542-4100 Fax:

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

ENTITY NAME - give to	ne exact name of the LLC (fore	ign LLCs – give name in domic	ile state or country):
A.C.C. FILE NUMBER (Find the A.C.C. file number	if known): on the upper corner of filed docum	ents OR on our website at: http://	www.azcc.gov/Divisions/Corporations
MEMBERS – give the n Attachment form.	ame and address of all Membe		use another <u>Member Structure</u>
TIBERIU B	OCA	2.	
TOLINI BUTTE	2 22	1 Name	
TIBERIU BUTULA	7.85021	Address 1	
dress 2 (optional)	2 3 3	Address 2 (optional)	1 1
У [State or Zip	City	State or Zip Province
untry 1		4.	
lame		Name	
dress 1 .		Address 1	
dress 2 (optional)		Address 2 (optional)	
ty [State or Zip	City	State or Zip Province
ountry !		6.	1
ame		Name	
ddress 1		Address 1	
ddress 2 (optional)		Address 2 (optional)	
lty	State or Zip	City	State or Zip Province
country		8.	
lame		Name	
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	

State or Province Clear Form

Print Forn

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

STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed to Statutory Agent (this must match exactly the name as listed on the document appointing the
statutory agent, e.g., Articles of Organization or Articles of Incorporation):
951
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:
TIBERIU BOCA
THE POCH
STATUTORY AGENT SIGNATURE:
TATOTORY AGENT SIGNATORE.
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 <i>under penalty of perjury</i> that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.
Tibery Bock 1-27
UIRED - check only one:
Individual as statutory agent: I am Entity as statutory agent: I am signing of
Individual as statutory agent: I am signing or signing on behalf of myself as the individual (natural person) named as statutory agent. Entity as statutory agent: I am signing or behalf of the entity named as statutory agent and I am authorized to act for that entity.

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.

Fax:

602-542-4100

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.

All fees are nonrefundable - see Instructions.



Corporations Division

COMMISSIONERS

Chairman, Robert "Bob" Burns Boyd Dunn Sandra D. Kennedy Justin Olson Lea Márquez Peterson

Date: 1/23/2020

Delivered via: Mail

RECEIVED

TIBERIU BOCA 1541 W BUTLER DRIVE PHOENIX AZ 85021

JAN 2 7 2020

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

RE:

Entity Name:

9 ST LLC

ACC Order Number:

201912300674588

Document Received Date:

12/30/2019

Rejected Document ID:

9321311

If you submitted a payment, it has been deposited and is nonrefundable pursuant to A.R.S. § 29-851, unless otherwise noted below.

The document Articles of Organization you submitted is REJECTED for the following reasons:

The management structure attachment does not match the management structure indicated. If the LLC will
be manager-managed, complete and attach only the Manager Structure Attachment; all persons will be listed on
that one attachment. If the LLC will be member-managed, complete and attach only the Member Structure
Attachment; all persons will be listed on that one attachment.

Rejection Comments: Management Structure: please select the correct attachment document that is mark for for guestion 7.

YOUR NEXT STEPS:

Return the corrected document to us per the above instructions *no later than 30 days after the date of this letter* in order to keep your original filing date. If we receive the corrected document more than 30 days after the date of this letter, the original filing date will not apply; the corrected document's filing date would be the new received date if the document is approved for filing.

Make corrections and resubmit online if:

- You originally submitted online, and
- There are no payment issues noted above, and
- No new document type is required.

Make corrections and resubmit on paper if:

- You originally submitted by mail or over the counter, or
- There is a payment issue, or
- A different or new document type is required.

For online resubmission, log into your account and select the document under "My Rejected Filings."

For paper resubmission, return to the ACC the following:

1. All pages of the corrected or revised document, including any original attachments;