

Document Type: **Articles of Organization**

Document Fee: **\$0.00**

Entity Name: **B&C BENNETT SALES LLC**

Additional Fee: **\$0.00**

Entity Information

Entity Name: B&C BENNETT SALES LLC

Entity Type: Domestic LLC


Entity Email Address: brooktrout2112@gmail.com

Effective Date: 08/06/2020

Effective Time: 11:11 AM

Character of Business: Any legal purpose

Character of Business Sub Code:

 Perpetual (forever)

Statutory Agent Information

Name	Attention	Address	Email
Brook Bennett		7242 W. Lone Tree Trail, PEORIA, AZ, 85383, USA	brooktrout2112@gmail.com
Attention	Mailing Address	7242 W. Lone Tree Trail PEORIA, AZ, 85383, USA	

Principal Address

Attention	Address
	7242 W. Lone Tree Trail, PEORIA, AZ, 85383, USA

Principal Information

Management Structure: Manager-Managed

Title	Name	Attention	Address	Email	Date Taking Office
Member	Brook Bennett		7242 W. Lone Tree Trail, PEORIA, AZ 85383, USA	brooktrout2112@gmail.com	
Manager	Carrie Bennett		7242 W. Lone Tree Trail, PEORIA, AZ 85383, USA	brooktrout2112@gmail.com	

Organizer Information

Name	Attention	Address	Email	Phone Number
Carrie Bennett		USA		
Brook Bennett		USA		

Uploaded Attachments

The eCorp system will take the information you've entered and create the Articles of Organization. Do you want to use the eCorp

Articles as your official document submitted for filing?

☐ Yes ☒ No

You may upload your own official Articles of Organization **as a .pdf file**. NOTE – if your document is missing any required information or does not match the information you've entered, the document will be rejected and you will have the opportunity to correct it at no additional cost.

File Name

B&C Bennett Sales Articles of Incorporation.pdf

B&C Bennett Sales Certificate of Disclosure.pdf

B&C Bennett Sales Statutory Agent Acceptance.pdf

Signature

By typing/entering my name, I intend to affix my electronic signature acknowledging that this electronic document is submitted in compliance with Arizona law. I certify that the information on the electronic document is true, complete, and accurate as of the date the electronic filing is submitted.

☒ I Agree

Name

Carrie Bennett

Brook Bennett

Title

Organizer

Authorized Agent

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

**ARTICLES OF INCORPORATION
FOR-PROFIT or PROFESSIONAL CORPORATION**

Read the Instructions [C010i](#)

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

☒ FOR-PROFIT (BUSINESS) CORPORATION ☐ PROFESSIONAL CORPORATION

2. ENTITY NAME - [see Instructions C010i](#) for naming requirements - give the exact name of the corporation:

B&C Bennett Sales LLC

3. PROFESSIONAL CORPORATION SERVICES - if professional corporation is checked in number 1, briefly describe the professional service or services that the professional corporation will provide (examples: law firm, accounting, medical):

4. CHARACTER OF BUSINESS - briefly describe the character of business the corporation initially intends to conduct in Arizona. **NOTE** that the character of business that the corporation ultimately conducts is not limited by the description provided.

Any Legal Purpose

5. SHARES - [see Instructions C010i](#) - list the class (common, preferred, etc.) and total number of shares of each class that the corporation is **AUTHORIZED** to issue - the total must be greater than zero. If more space is needed, check this box ☐ and complete and attach the [Shares Authorized Attachment](#) form C087.

Class: Common Series: 1 Total: 100

Class: Series: Total:

6. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

6.1 Is the Arizona known place of business address the same as the **street address** of the statutory agent? ☒ Yes - go to number 7 and continue

☐ No - go to number 6.2 and continue

6.2 If you answered "**No**" to number 6.1, give the **physical or street address** (not a P.O. Box) of the known place of business of the corporation in Arizona:

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

7. DIRECTORS - list the **name and business address** of each and every Director of the corporation. If more space is needed, check this box ☐ and complete and attach the [Director Attachment](#) form C082.

Brook Bennett					
Name			Name		
7242 W. Lone Tree Trail					
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
Peoria	AZ	85383			
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		

8. STATUTORY AGENT - [see Instructions C010i](#):

8.1 REQUIRED - give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL - mailing address in Arizona of statutory agent (can be a P.O. Box):		
Brook Bennett					
Statutory Agent Name (required)					
Attention (optional)			Attention (optional)		
7242 W. Lone Tree trail					
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
Peoria	AZ	85383	City	State	Zip
City	State	Zip	City	State	Zip
8.3 REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Incorporation.					

9. **REQUIRED** - you must complete and submit with the Articles a **Certificate of Disclosure**. The Articles will be rejected if the Certificate of Disclosure is not simultaneously submitted.


10. **INCORPORATORS** - list the **name and address**, and provide the **signature**, of each and every incorporator - minimum of one is required. If more space is needed, check this box ☐ and complete and attach the **Incorporator Attachment** form C084.

Brook Bennett

Name
7242 W. Lone Tree Trail
Address 1
Address 2 (optional)
Peoria AZ 85383
City State Zip
UNITED STATES
Country

SIGNATURE - see Instructions C010i:

By checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document together with any attachments is submitted in compliance with Arizona law.

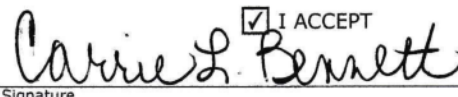
☒ I ACCEPT

Signature
Brook Bennett 8/24/2020
Printed Name Date

Carrie Bennett

Name
7242 W. Lone Tree Trail
Address 1
Address 2 (optional)
Peoria AZ 85383
City State Zip
UNITED STATES
Country

SIGNATURE - see Instructions C010i:

By checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document together with any attachments is submitted in compliance with Arizona law.

☒ I ACCEPT

Signature
Carrie Bennett 8/24/2020
Printed Name Date

Expedited or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for prices.

Filing Fee: \$60.00 (regular processing)
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.

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

CERTIFICATE OF DISCLOSURE*Read the Instructions [C003i](#)***1. ENTITY NAME** – give the exact name of the corporation in Arizona:B&C Bennett Sales LLC**2. FELONY/JUDGMENT QUESTIONS:**

Has any person (a) who is currently an officer, director, trustee, or incorporator, or (b) who controls or holds over ten percent of the issued and outstanding common shares or ten percent of any other proprietary, beneficial or membership interest in the corporation been:

2.1	Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the five year period immediately preceding the signing of this certificate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.2	Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the five-year period immediately preceding the signing of this certificate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.3	Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the five-year period immediately preceding the signing of this certificate, involving any of the following: a. The violation of fraud or registration provisions of the securities laws of that jurisdiction; b. The violation of the consumer fraud laws of that jurisdiction; c. The violation of the antitrust or restraint of trade laws of that jurisdiction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.4	If any of the answers to numbers 2.1, 2.2, or 2.3 are YES , you MUST complete and attach a Certificate of Disclosure Felony/Judgment Attachment form C004.		

3. BANKRUPTCY QUESTION:

3.1	Has any person (a) who is currently an officer, director, trustee, incorporator, or (b) who controls or holds over twenty percent of the issued and outstanding common shares or twenty percent of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a twenty percent interest in any other corporation (not the one filing this Certificate) on the bankruptcy or receivership of the other corporation ?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2	If the answer to number 3.1 is YES , you MUST complete and attach a Certificate of Disclosure Bankruptcy Attachment form C005.		

IMPORTANT: If within 60 days of the delivery of this Certificate to the A.C.C. any person not included in this Certificate becomes an officer, director, trustee or person controlling or holding over ten percent of the issued and outstanding shares or ten percent of any other proprietary, beneficial or membership interest in the corporation, the corporation must submit a SUPPLEMENTAL Certificate providing information about that person, signed by all incorporators or by a duly elected and authorized officer.

SIGNATURE REQUIREMENTS:	
Initial Certificate of Disclosure:	This Certificate must be signed by all incorporators. If more space is needed, complete and attach an Incorporator Attachment form C084.
Foreign corporations:	This Certificate may be signed by a duly authorized officer or by the Chairman of the Board of Directors.
Credit Unions and Loan Companies:	This Certificate must be signed by any 2 officers or directors.

Brook Bennett

Name		
7242 W. Lone Tree trail		
Address 1		
Address 2		
Peoria	AZ	85383
City	State	Zip
Country	UNITED STATES	

SIGNATURE - see Instructions C003i:

By typing or entering my name and checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document together with any attachments is submitted in compliance with Arizona law.

☒ I ACCEPT



Signature

Brook Bennett

8/12/2020

Printed Name

Date

REQUIRED - check only one:

- ☒ **Incorporator** - I am an incorporator of the corporation submitting this Certificate.
- ☐ **Officer** - I am an officer of the corporation submitting this Certificate
- ☐ **Chairman of the Board of Directors** - I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
- ☐ **Director** - I am a Director of the credit union or loan company submitting this Certificate.

Carrie Bennett

Name		
7242 W. Lone Tree Trail		
Address 1		
Address 2		
Peoria	AZ	85383
City	State	Zip
Country	UNITED STATES	

SIGNATURE - see Instructions C003i:

By typing or entering my name and checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document together with any attachments is submitted in compliance with Arizona law.

☒ I ACCEPT



Signature

Carrie Bennett

8/12/2020

Printed Name

Date

REQUIRED - check only one:

- ☐ **Incorporator** - I am an incorporator of the corporation submitting this Certificate.
- ☒ **Officer** - I am an officer of the corporation submitting this Certificate
- ☐ **Chairman of the Board of Directors** - I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
- ☐ **Director** - I am a Director of the credit union or loan company submitting this Certificate.

Expedited or Same Day/Next Day services are available for an additional fee - see Instructions or Cover sheet for prices.

Filing Fee: None	Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax: 602-542-4100

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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 Articles of Incorporation):

B&C Bennett Sales 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:

Brook Bennett

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.



Brook Bennett

8/12/2020

Signature

Printed Name

Date

REQUIRED – check only one:

<input checked="" type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.	<input 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.
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Expedited or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for prices.

Filing Fee: none (regular processing) All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
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