

CES

Arizona Corporation Commission - REJECTED: 2/5/2021

21011409001602

DO NOT WRITE ABOVE THIS LINE, RESERVED FOR A/C USE ONLY.

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

*Read the Instructions C0101*

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 C0101 for naming requirements - give the exact name of the corporation:

SOUTHWEST TANK, INC.

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.

Construction

5. **SHARES** - see Instructions C0101 - 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: 1,000,000  
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			

01/13/2021 13:59 FAX 9484679450

BERSCHAUER LAW OFFICES

**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.

Paula Wombles			Lawrence Wombles		
Name			Name		
9841 South Dike Road			9841 South Dike Road		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
Mohave Valley	AZ	86440	Mohave Valley	AZ	86440
City	State or Province	Zip	City	State or Province	Zip
Country	UNITED STATES		Country	UNITED STATES	
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 C010:

<p><b>8.1 REQUIRED</b> - 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:</p>		<p><b>8.2 OPTIONAL</b> - mailing address in Arizona of statutory agent (can be a P.O. Box):</p>	
Paula Wombles			
Statutory Agent Name (required)			
Address (optional)		Address (optional)	
9841 South Dike Road			
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City	State	Zip	City
Mohave Valley	AZ	86440	
<p><b>8.3 REQUIRED</b> - the <u>Statutory Agent Acceptance</u> form M002 must be submitted along with these Articles of Incorporation.</p>			

01/13/2021 13:59 FAX 9494579450

BERSCHAUER LAW OFFICES

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.

David P. Berschauer

Name

23232 Peralta Drive, Ste. 102

Address 1

Address 2 (optional)

Laguna Hills CA 92653

City State Zip

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

David P. Berschauer

Printed Name Date

Name

Address 1

Address 2 (optional)

City State Zip

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

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 are only the minimum provided 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 records and are open for public inspection. If you have questions after reading the instructions, please call 602-542-3036 or (within Arizona only) 800-343-5819.

C010.b01  
Rev: 3/2020Arizona Corporation Commission - Corporations Division  
Page 3 of 3



**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.

David P. Berschauer

Name

23232 Peralta Drive, Ste. 102

Address 1

Address 2

Laguna Hills

CA

92653

City

Country

UNITED STATES

State

Zip

**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

David P. Berschauer

Printed Name

3/2/2021

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.

Name

Address 1

Address 2

City

Country

State

Zip

**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

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

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.

01/13/2021 13:59 FAX 9494579450

BERSCHAUER LAW OFFICES

21011409001002

Clear Form

Print Form

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

**STATUTORY AGENT ACCEPTANCE***Please read Instructions M0021*

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):

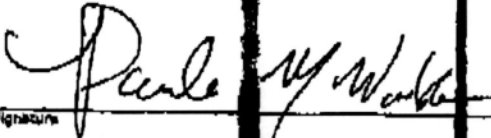
SOUTHWEST TANK, INC.

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:

Paula Wombles**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.



Paula Wombles

1/13/2021

**REQUIRED** – check only one:

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

**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

Please be advised that A.C.C. forms are for use only for 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 records and are open for public inspection. If you have questions after reading the instructions, please call 602-542-3325 or (within Arizona only) 800-345-5912.



01/13/2021 13:58 FAX 804579450

BERSCHAUER LAW OFFICES

21011909001002

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

**OFFICER ATTACHMENT**

1. **ENTITY NAME** - give the exact name of the corporation as currently shown in A.C.C. records:

SOUTHWEST TANK, INC.

2. **OFFICER CHANGE (CHANGE IN OFFICERS)** - Use one block per person -  
 To REMOVE an officer - list the name only of the officer being removed and check "Remove officer."  
 To ADD an officer - list the name and address of the officer being added and check "Add officer."  
 To CHANGE ADDRESS only - list the name and NEW address and check "Address change."  
 To CHANGE NAME of existing officer - list the current name, then the NEW name, and check "Name change."  
 If more space is needed, complete and attach another Officer Attachment form.

Name currently shown in ACC records			Name currently shown in ACC records		
Paula Wombles			Lawrence Wombles		
NEW Name			NEW Name		
9841 South Dike Road			9841 South Dike Road		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
Mohave Valley	AZ	86440	Mohave Valley	AZ	86440
City	State or Province	Zip	City	State or Province	Zip
UNITED STATES			UNITED STATES		
Country			Country		
1/2021		President/EO	1/2021		Secretary
Date taking office (optional)			Date taking office (optional)		
<input type="checkbox"/> Address change	<input type="checkbox"/> Add officer		<input type="checkbox"/> Address change	<input checked="" type="checkbox"/> Add officer	
<input type="checkbox"/> Name change	<input type="checkbox"/> Remove officer		<input type="checkbox"/> Name change	<input type="checkbox"/> Remove officer	
Name currently shown in ACC records			Name currently shown in ACC records		
Lawrence Wombles			Lawrence Wombles		
NEW Name			NEW Name		
9841 South Dike Road			9841 South Dike Road		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
Mohave Valley	AZ	86440	Mohave Valley	AZ	86440
City	State or Province	Zip	City	State or Province	Zip
UNITED STATES			UNITED STATES		
Country			Country		
1/2021		Treasurer	1/2021		
Date taking office (optional)			Date taking office (optional)		
<input type="checkbox"/> Address change	<input type="checkbox"/> Add officer		<input type="checkbox"/> Address change	<input type="checkbox"/> Add officer	
<input type="checkbox"/> Name change	<input type="checkbox"/> Remove officer		<input type="checkbox"/> Name change	<input type="checkbox"/> Remove officer	

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:SOUTHWEST TANK, INC.**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:

<b>2.1</b>	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
<b>2.2</b>	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
<b>2.3</b>	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
<b>2.4</b>	If any of the answers to numbers 2.1, 2.2, or 2.3 are <b>YES</b> , you <b>MUST</b> complete and attach a Certificate of Disclosure Felony/Judgment Attachment form C004.		

**3. BANKRUPTCY QUESTION:**

<b>3.1</b>	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 <b>any other corporation</b> (not the one filing this Certificate) on the bankruptcy or receivership of the <b>other corporation</b> ?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>3.2</b>	If the answer to number 3.1 is <b>YES</b> , you <b>MUST</b> complete and attach a Certificate of Disclosure Bankruptcy Attachment form C005.		