

Document Type: **Articles of Organization**

Document Fee: **\$50.00**

Entity Name: **Sondora Wigs LLC**

Additional Fee: **\$0.00**

Entity Information

Entity Name: Sondora Wigs LLC

Entity Type: Domestic LLC

Entity Email Address: sondorawigs@yahoo.com

Effective Date: 03/20/2021

Effective Time: 05:37PM

Character of Business: Any legal purpose

Character of Business Sub Code:

☒ Perpetual (forever)

Statutory Agent Information

Name	Attention	Address	Email
JNL Tax Group LLC	Larry Crayton	340 W 32nd Street 373, YUMA, AZ, 85364, USA	jnlconsultants1@gmail.com
Attention	Mailing Address		
Larry Crayton	340 W 32nd Street 373 YUMA, AZ, 85364, USA		

Principal Address

Attention	Address
Larry Crayton	340 West 32nd. St. 373, YUMA, AZ, 85364, USA

Principal Information

Management Structure: Member-Managed

Title	Name	Attention	Address	Email	Date Taking Office
Member	Sondra Lynne Bell		340 West 32nd. St. 373, YUMA, AZ 85364, USA	sondorawigs@yahoo.com	

Organizer Information

Name	Attention	Address	Email	Phone Number
Miranda Dupress Bell		29845 Peacock Mt. Dr., MENIFEE, CA 92584, USA		9514668741

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

File Name

Agent.pdf

Manager.pdf.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**

Sondra Bell

Title

Authorized Agent

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:

Sondora Wigs 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.		
JNL Tax Group LLC					
Statutory Agent Name					
Larry Crayon			Attention (optional)		
Attention (optional)					
340 W. 32nd. St. 373			Address 1		
Address 1					
Address 2 (optional)		AZ	Address 2 (optional)		AZ
City Yuma	State	Zip 85364	City	State	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

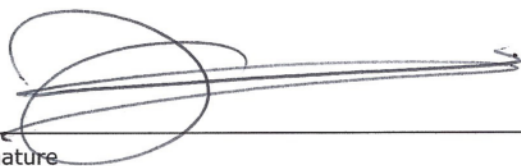
5.2 If you answered "**No**" to number 5.1, provide the principal address below:

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

03/20/2021

Date

Larry Crayton

Printed Name

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

Filing Fee: \$50.00 (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.

Clear Form

Print Form

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

MANAGER STRUCTURE ATTACHMENT

1. ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
Sondora Wigs 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. Manager Name Sondra Bell Address 1 340 W. 32nd. St. 373 Address 2 (optional) Yuma AZ 85364 City UNITED STATES State or Province Zip Country <input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more	2. Member Name Miranda Bell Address 1 340 W. 32nd. St. 373 Address 2 (optional) Yuma AZ 85364 City UNITED STATES State or Province Zip Country <input type="checkbox"/> Manager <input 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