5. PRINCIPAL ADDRESS:

21060109578589

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE DNLY. ARTICLES OF ORGANIZATION Read the Instructions L010i 1. ENTITY TYPE - check only one to indicate the type of entity being formed: LIMITED LIABILITY COMPANY PROFESSIONAL LIMITED LIABILITY COMPANY (entity name must contain (entity name must contain the words the words "Limited Liability Professional Limited Liability Company", Company", "LLC" or L.C.) "PLLC" or "PLC") ENTITY NAME - see Instructions L010i for full naming requirements - give the exact name of the LLC: 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): STATUTORY AGENT for service of process - see Instructions L010i 4.1 REQUIRED - give the name (can be 4-2 REQUIRED - mailing address in Arizona an Arizona resident or an Arizona-registered of Statutory Agent (can be a P.O. Box): entity) and physical or street address (not a M Check box if same as physical/street address. P.O. Box) in Arizona of the statutory agent: Attention (optional) Attention (optional) 305 N Fraser Dr E Address 1 Address 2 (optional) Address Z (optional) ΑŹ AZ CITY Mesa State 4.3 REQUIRED—the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.

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

							1	
	5.2	If you answered	"No" to numbe	r 5.1, provide the	ė principa	al address b	elow:	
				***				
		Attention (optional)			·	~		745
		Address 1				,	<del></del>	
		Address 2 (optional)	140					
		Country			State or Province	Zip		
			port, w					
CC	MPLE	TE NUMBER (	OR NUMBE	R 7 - NOT B	отн.		4	
6.	compar membe	v) and complete	and attach <b>ON</b>	uctions <u>L010i</u> – c agers (meaning o L <b>Y</b> the <u>Manager S</u> n the Manager St tachment.	one or m	ore manage	rs will	run the
7.	there is Structur	no operating aga e Attachment fo	reement stating	tions L010i - che leaning all memb otherwise), and embers will be lis if it is submitted	complete	un the comp e and attach	ONL	ogether if
		mar me mon	nation contain	eclares and cer led within this of rect, and is sub	i <i>nc</i> maa	nt tanatha		
Sign	tion	a_M	Petrim	Ĵ	, <u></u>	<u>₩</u>	Jart	26,2021
	lona	1 M Petr	ini				A STANCE	

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)

Mail:

Arizona Corporation Commission - Examination Section

All fees are nonrefundable - see Instructions.

1300 W. Washington St., Phoenik, 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.

4808330573

	STATUTORY AGENT ACCEPTANCE	
	Please read Instructions MQ02i	
1.	ENTITY NAME – give the exact name in Arizona of the corporation or LLC that Statutory Agent (this must match exactly the name as listed on the document a statutory agent, e.g., Articles of Organization or Articles of Incorporation):  Sevuice Local LLC	has appointed the poointing the
2.	ointed by the OTE - the name opoints the ling any middle	
	Flona Madison Petrini	
3.	STATUTORY AGENT SIGNATURE:	
	By the signature appearing below, the individual or entity named in number 2 at accepts the appointment as statutory agent for the entity named in number 1 at acknowledges that the appointment is effective until the appointing entity replacement or the statutory agent resigns, whichever occurs first.	
	The person signing below declares and certifies under penalty of perjury that the contained within this document together with any attachments is true and corresubmitted in compliance with Arizona law.	e information ct, and is
Sign	ina Madisen Potami Frona Madison Petrini M	ay 26,2027
REC	QUIRED — check only one:	
[X	Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.  Entity as statutory agent: behalf of the entity named a and I am authorized to act for the entity named and I am authorized to act for the entit	s statutory agent.
_		
xped	ited or Same Day/Next Day services are available for an additional fee – see Instructions o	r Cover sheet for price
1	ng Fee: none (regular processing)  Mail: Arizona Corporation Commission - Ex	amination Section
All	fees are nonrefundable - see Instructions.  1300 W. Washington St., Phoenix, Ar 602-542-4100	nzona 85007
All dos	be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those individual needs of your business.  Surports filed with the Arizona Corporation Commission are public record and are open for public inspection. have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.	matters that may pertain



COMMISSIONERS

Corporations Division

Lea Márquez Peterson - Chairwoman Sandra D. Kennedy Justin Olson Anna Tovar Jim O'Connor

Date: 4/15/2021

Delivered via: Email

Fiona Petrini

RE:

**Entity Name:** 

Service Local LLC

ACC Order Number:
Document Received Date:

202103311182802 03/31/2021

Rejected Document ID:

9946505

If you submitted a payment, it has been deposited and is nonrefundable pursuant to A.R.S. § 29-3213, unless otherwise noted below.

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

Rejection Comments: The following issue(s) need to be addressed before your filing can be approved.

\*\*\* Statutory Agent rejected or did not accept the appointment. When appointing a Statutory Agent online the agent will receive an email containing a link and instructions to accept the appointment online. Alternatively, you may submit a Statutory Agent Acceptance form during the online filing process. This form can be downloaded from our website at azcc.gov/corporations/forms.

#### YOUR NEXT STEPS:

Return the corrected document to us per the above instructions with this rejection letter. Please return the entire corrected document 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.

## YOU CAN RESUBMIT ONE OF THE FOLLOWING WAYS:

### ONLINE - Only if:

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

# BY PAPER - Only 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;

- 2. Any additional documents or forms required as noted in the above reasons for rejection;
- 3. Payment of any amounts owed as noted in the above reasons for rejection; and
- 4. A copy of this letter (we must have the Rejected Document ID).

If you have questions, review the Instructions to the document you submitted for more detailed information. You may also contact Customer Service at 602-542-3026 or, within Arizona only, 800-345-5819.

Division Director Tanya Gibson 1300 W.Washington Street, Phoenix, AZ 85007 | 602-542-3026 | azcc.gov MAY 2 7 2021

602.542.4100

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

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

# ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

14/4/4							
	YOU FILING?  Ty Change to existing entity Re-submission of rejected filing						
New Entit							
ENTITY NA	ME - give the exact name of the entity as currently shown in A.C.C. recor	Ma.					
Servic	elocal IIC	us:					
EXPEDITED	PROCESSING? YES - select 1 option below						
NOTE: A current p	PROCESSING? YES - select 1 option below NO - pay only to those number is required for ALL Same Day/Next Day services. Same Day/Next Day service will not guarantees that the document(s) will be examined within the state of the service will not guarantees.						
Document filing fe	les are listed on the bottom of each form or on the fee schedule on our website, http://ecorp.azcc.gov, u	s are nonrefundable. Inder the FAOs					
EXPEDI:	FED PROCESSING, ADD \$35.00 SAME DAY SERVICE, ADD Document will be examined by 5:00pm	\$200.00					
A2000 NO. CO. C.	be received by 10:00am MST						
↓ Locument wi	the examined within 2-hours of submission lived by 3:00pm MST  NEXT DAY SERVICE, ADD Document will be examined by 5:00pm	\$100.00					
		5:00pm MST					
MOD Acc	Already paid this is a re-submission						
Cash - do not ma	out t #. I otal amount to deduct:						
Checks or more	d only for in-person submittals at the Phoenix office ONLY (Tucson does not accept cash).						
abbreviations. Ch	seeks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS the and address of the account holder; no imprinted or proprinted check properly filled the country to the account holder; no imprinted or proprinted check properly the country to the countr	no include: no imprinted					
I Check numbers: +	property there (now accounts)	Dames addresses A.					
of good standing.	ay be used for in-person submittals, and for online corporation annual reports, online name reservations We accept only Visa or MasterCard.	s, or anline certificates					
REQUIRED -	RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE						
	NOTE: PHONE NUMBER REQUIRED FOR ALL RETURN DELIVERY OPTIC	:): ONS					
	Emeil address REQUIRED: FION & SEVUICE LOCAL@ 9Mail.com						
☐ Email	Phone number REQUIRED: (-) 3- ) 00-34 7-9						
	010 200 3628						
☐ Pick up	Name:	***					
	Phone number REQUIRED:						
	Name:						
☐ Mail	Address:						
	City: State: Zip:						
	Phone number REQUIRED:						
DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEL							
	FOR ARIZONA CORPORATION COMMISSION USE ONLY						
PICK-UP B							
View curre	DATE:						

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