ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: FREE BLUE 1115 LLC

ENTITY ID: 23478140
ENTITY TYPE: Domestic LLC
EFFECTIVE DATE: 01/27/2023
CHARACTER OF BUSINESS: Any legal purpose

MANAGEMENT STRUCTURE: Manager-Managed

PERIOD OF DURATION: Perpetual PROFESSIONAL SERVICES: N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Yanitza Alvarez

PHYSICAL ADDRESS: 5113 S Stanley PI, TEMPE, AZ 85282

MAILING ADDRESS: 5113 S Stanley PI, TEMPE, AZ 85282

PRINCIPAL ADDRESS

5113 S Stanley PI, TEMPE, AZ 85282

PRINCIPALS

Manager: NADJA ASSEF - 5113 S Stanley PI, TEMPE, AZ, 85282, USA - - Date of Taking Office: Manager: YANITZA ALVAREZ - 5113 S Stanley PI, TEMPE, AZ, 85282, USA - - Date of Taking Office: Member: YANITZA JENEE ALVAREZ REVOCABLE TRUST UTD 03/31/2022, TRUSTEE YANITZA JENEE ALVAREZ - 5113 S Stanley PI, TEMPE, AZ, 85282, USA - - Date of Taking Office:

ORGANIZERS

YANITZA ALVAREZ: 5113 S STANLEY PL, TEMPE, AZ, 85282, USA, YJALVARE@GMAIL.COM

SIGNATURES

Organizer: Yanitza Alvarez - 02/13/2023



oli	ear Form					
	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): Free Blue 1115 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:					
	Yanitza Alvarez					
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, at acknowledges that the appointment is effective until the appointing entity replaces the 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 submitted in compliance with Arizona law.						
-	Yanitza Alvarez 1/27/23					
	EQUIRED - check only one:					
_	Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent. 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.					
	Expedited services are available for an additional fee - see Instructions or Cover sheet for prices.					
	Illing Fee: none (regular processing) Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100					
	ease 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 the individual needs of your business. All documents filed with the Arizona Corporation Commission are public record and are open for public inspection. 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.

ARTICLES OF ORGANIZATION

Read the Instructions L010i

TED LIABILITY COMPAN by name must contain vords "Limited Liability pany", "LLC" or L.C.) IAME — see Instruction 115 LLC	ons LO10) for full	(entity name must of Limited Liability Com naming requirements	MITED LIABILITY CO ontain the words "Profi pany", "PLLC" or "PLC	essional ")			
y name must contain vords "Limited Liability pany", "LLC" or L.C.) IAME - see Instruction IONAL LIMITED Lumber 1 above, describe	ions L010i for full	(entity name must of Limited Liability Com naming requirements	ontain the words "Profi apany", "PLLC" or "PLC	essional ")			
IONAL LIMITED Lumber 1 above, describ	IABILITY COM	IPANY SERVICES -	– give the exact r	name of the LLC:			
IONAL LIMITED L	IABILITY COM	IPANY SERVICES -					
umber 1 above, describe	IABILITY COM e the professional se	IPANY SERVICES -					
No.		ervices that the profession	nal LLC will provide	(examples: law			
RY AGENT for ser	vice of process	s - 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): Check box if same as physical/street address. 				
Z							
		Attention (optional) Address 1					
	Toron	Address 2 (optional)	Δ7	T			
State	85282 Zip	City	State	Zip			
ED- the Statutory Agent	Acceptance form M	002 must be submitted a	long with these Art	icles of Organizatio			
1	UIRED – give the name vizona resident or an Ari ty) and physical or stru Box) in Arizona of the s	VIRED – give the name (can be knizona resident or an Arizona-registered by) and physical or street address (not a Box) in Arizona of the statutory agent: PL AZ 85282 State Zip RED— the Statutory Agent Acceptance form M	Attention (optional) AZ 85282 State Zip City Address 2 (optional) Address 2 (optional) CRED— the Statutory Agent Acceptance form M002 must be submitted as	Arizona resident or an Arizona-registered try) and physical or street address (not a Box) in Arizona of the statutory agent: Attention (optional) Address 1 Address 1 Address 2 (optional) State RED— the Statutory Agent Acceptance form M002 must be submitted along with these Art			

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

And the second					
Attention (optional)					
Address 1					
Address 2 (optional)					
City	State or Province	Zip			

COMPLETE NUMBER 6 OR NUMBER 7 - NOT BOTH.

- 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.

	01/27/2023
Signature	Date
Yanitza Alvarez	

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

	Mail: Arizona Corporation Commission - Examination Section
Filing Fee: \$50.00 (regular processing)	1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fax (for Regular or Expedite Service ONLY): 602-542-4100
All fees are numerundable - see miscuccions.	Fax (for Same Day/Next Day Service ONLY): 602-542-0900

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.





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MANAGER STRUCTURE ATTACHMENT

1.	ENTITY NAME - give the exact name of the LLC (foreign LLCs - give name in domicile state or cour	ntry):	
	Free Blue 1115 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.			2.				
Yanitza Alvarez			Nadja Assef				
5113 S Stanley Pl			Name				
			5113 S Stanley	Pl			
Address 1			Address 1				
Address 2 (optional)		00000	Address 2 (optional)		A 7	85282	
Tempe	AZ	85282	Tempe	and the last of th	AZ State or	Zip	
UNITED STATES -	State or Province	Zip	UNITED STATES	-	Province	2.4	
Country			Country				
Manager Men	nber owning 2	0% or more	✓ Manager	Men	nber owning	20% or more	
3.			4.				
Yanitza Jenee Alvarez	Revocable	Trust UT					
Name			Name				
5113 S Stanley Pl							
Address 1			Address 1				
Address 2 (optional)	1		Address 2 (optional)				
Tempe	AZ	85282			-		
UNITED STATES	State or Province	Zip	City	~	State or Province	Zip	
Country			Country				
□ Manager ✓ Manager	ber owning 20	104 or more	Manager	Пмет	her owning	20% or more	
Manager Mem	iber owning 20	7-10 OF THOSE	6.	ricii	iber owining	20 % of more	
•							
Name			Name				
Address 1			Address 1				
Address 2 (optional)	1 100		Address 2 (optional)				
City	State or Province	Zip	City	-	State or Province	Zip	
Country			Country				
Manager Mem	ber owning 20	1% or more	Manager	Men	ber owning	20% or more	
Manager Mem	Dei Omming Zu	70 01 111016	Tranagai		coming	20 70 01 111010	