

## **ARTICLES OF ORGANIZATION**

### **OF LIMITED LIABILITY COMPANY**

#### **ENTITY INFORMATION**

**ENTITY NAME:** 83RE, LLC  
**ENTITY ID:** 23620653  
**ENTITY TYPE:** Domestic LLC  
**EFFECTIVE DATE:** 12/21/2023  
**CHARACTER OF BUSINESS:** Any legal purpose  
**MANAGEMENT STRUCTURE:** Manager-Managed  
**PERIOD OF DURATION:** Perpetual  
**PROFESSIONAL SERVICES:** N/A

#### **STATUTORY AGENT INFORMATION**

**STATUTORY AGENT NAME:** InCorp Services, Inc.  
**PHYSICAL ADDRESS:** Attn: InCorp Services, Inc., 8825 N 23rd Ave Ste 100,  
PHOENIX, AZ 85021  
**MAILING ADDRESS:** Attn: InCorp Services, Inc., 8825 N 23rd Ave Ste 100,  
PHOENIX, AZ 85021

#### **PRINCIPAL ADDRESS**

4032 W. 5800 N. , MTN GREEN, UT 84050

#### **PRINCIPALS**

Manager: Blaine Blood - 4032 W. 5800 N., MTN GREEN, UT, 84050, USA - - Date of Taking Office:  
Member: PV3 Enterprises, LLC - 4032 W. 5800 N., MTN GREEN, UT, 84050, USA - - Date of Taking Office:

#### **ORGANIZERS**

Blaine Blood: 4032 W. 5800 N., MTN GREEN, UT, 84050, USA,

#### **SIGNATURES**

Organizer: Blaine Blood - 12/21/2023

Clear Form

Print Form

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

## 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):

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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:

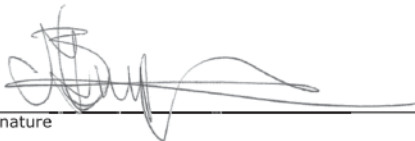
InCorp Services, Inc.

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### 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.



Louise Breytenbach on behalf of InCorp Services, Inc.

Signature

Printed Name

Date

#### REQUIRED – 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.**

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 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.