ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME:

CORNERSTONE CONSTRUCTION USA LLC

ENTITY ID: ENTITY TYPE: EFFECTIVE DATE: CHARACTER OF BUSINESS: MANAGEMENT STRUCTURE: PERIOD OF DURATION: PROFESSIONAL SERVICES: 23692569 Domestic LLC 06/12/2024 Construction Manager-Managed Perpetual N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME:	Arizona Legal Documents Services LLC
PHYSICAL ADDRESS:	Attn: Untouchable Syndicate LLC, 1837 S Mesa Dr C100, United States, MESA, AZ 85210
MAILING ADDRESS:	Attn: Untouchable Syndicate LLC, 1837 S Mesa Dr C100, United States, MESA, AZ 85210

PRINCIPAL ADDRESS

Att: Untouchable Syndicate LLC, 1837 S Mesa Dr C100, United States, MESA, AZ 85210

PRINCIPALS

Manager: Samuel Jackson Foster - 1837 S Mesa Dr C100, United States, MESA, AZ, 85210, USA - ccllc365@gmail.com - Date of Taking Office: 06/10/2024

ORGANIZERS

Samuel Jackson Foster: 1837 S Mesa Dr, MESA, AZ, 85210, USA, ccllc365@gmail.com

SIGNATURES

Organizer: Samuel Jackson Foster - 06/12/2024

	DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.							
	ARTICLES OF ORGANIZATION							
	Read the Instructions <u>L010i</u>							
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:							

з. 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 – <u>see Instructions L010i</u>							
4.1	 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 <i>REQUIRED</i> – mailing address in Arizona			
				of Statutory Agent (can be a P.O. Box):			
					Check box if same as physical/street address.		
Statutory Agent Name							
Attention (optional)		Attention (optional)					
Address 1		Address 1					
Address 2 (opt			1	Address 2 (opti	onal)		
Address 2 (opt	onar)	AZ		Address 2 (opti	onar)	AZ	
City		State	Zip	City		State	Zip
4.3 <i>REQUIRED</i> – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Organization.							
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5. PRINCIPAL ADDRESS:

- 5.1 Is the 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)		
	Charles and	
City Country	State or Province	Zip

COMPLETE NUMBER 6 OR NUMBER 7 – NOT BOTH.

- 6. MANAGER-MANAGED LLC <u>see Instructions L010i</u> 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 <u>Manager Structure Attachment form L040</u>. (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 <u>see Instructions L010i</u> 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 <u>Member Structure Attachment form L041</u>. (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

Date

Printed Name

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				
	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.