

## ARTICLES OF ORGANIZATION

### OF LIMITED LIABILITY COMPANY

#### ENTITY INFORMATION

ENTITY NAME: SIMPLE STAYS AND GETAWAYS LLC  
ENTITY ID: 23814875  
ENTITY TYPE: Domestic LLC  
EFFECTIVE DATE: 04/16/2025  
CHARACTER OF BUSINESS: Any legal purpose  
MANAGEMENT STRUCTURE: Member-Managed  
PERIOD OF DURATION: Perpetual  
PROFESSIONAL SERVICES: N/A

#### STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Flor Moreno Collas  
PHYSICAL ADDRESS: 17410 North 16th Avenue, PHOENIX, AZ 85023  
MAILING ADDRESS: 17410 North 16th Avenue, PHOENIX, AZ 85023

#### PRINCIPAL ADDRESS

17410 North 16th Avenue, PHOENIX, AZ 85023

#### PRINCIPALS

Member: Flor Moreno Collas - 17410 North 16th Avenue, PHOENIX, AZ, 85023, USA -  
F.moreno1115@gmail.com - Date of Taking Office:

#### ORGANIZERS

Flor Moreno Collas: 17410 North 16th Avenue, PHOENIX, AZ, 85023, USA, F.Moreno1115@gmail.com

#### SIGNATURES

Authorized Agent: Flor MorenoCollas - 04/30/2025

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:

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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.



Signature

Printed Name

Date

#### REQUIRED – check only one:

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Individual as statutory agent:</b> I am signing on behalf of myself as the individual (natural person) named as statutory agent. | <input type="checkbox"/> <b>Entity as statutory agent:</b> 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.

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