# ARTICLES OF ORGANIZATION

#### OF LIMITED LIABILITY COMPANY

## **ENTITY INFORMATION**

**ENTITY NAME:** EMERALD EDGE TATTOOS LLC

ENTITY ID: 23915241
ENTITY TYPE: Domestic LLC
EFFECTIVE DATE: 11/30/2025

CHARACTER OF BUSINESS: Any legal purpose MANAGEMENT STRUCTURE: Member-Managed

PERIOD OF DURATION: Perpetual PROFESSIONAL SERVICES: N/A

#### STATUTORY AGENT INFORMATION

**STATUTORY AGENT NAME:** Rielyn Laurea White

PHYSICAL ADDRESS: 4315 E Thunderbird Rd Apt 210, PHOENIX, AZ 85032

MAILING ADDRESS: 4315 E Thunderbird Rd Apt 210, PHOENIX, AZ 85032

## **PRINCIPAL ADDRESS**

4315 E Thunderbird Rd Apt 210, PHOENIX, AZ 85032

## **PRINCIPALS**

Member: Rielyn Laurea White - 4315 E Thunderbird Rd Apt 210, PHOENIX, AZ, 85032, USA - - Date of Taking Office:

#### **ORGANIZERS**

Rielyn Laurea White: 4315 E Thunderbird Rd Apt 210, PHOENIX, AZ, 85032, USA,

#### **SIGNATURES**

Organizer: Rielyn Laurea White - 11/30/2025

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

# STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

| Statutory Agent (this must mat statutory agent, e.g., Articles o Emerald Edge Tattoos LLC  STATUTORY AGENT NAME - | ch exactly the name as listed of Organization or Articles of In                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | oration or LLC that has appointed the on the document appointing the corporation):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| STATUTORY AGENT NAME -                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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| must match <b>exactly</b> the statut<br>statutory agent (e.g. Articles of                                         | (this will be either an individuory agent name as listed in the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ratutory Agent appointed by the lal or an entity). <i>NOTE</i> - the name e document that appoints the rganization), including any middle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Rielyn Laurea White                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| By the signature appearing belo<br>accepts the appointment as sta<br>acknowledges that the appointr               | ow, the individual or entity nan<br>tutory agent for the entity nan<br>nent is effective until the appo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ned in number 1 above, and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| contained within this document                                                                                    | together with any attachment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                   | Rielyn Laurea White                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 11/30/2025                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
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| signing on behalf of myself as t                                                                                  | the individual behalf of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | statutory agent: I am signing on<br>the entity named as statutory agent<br>authorized to act for that entity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                   | Rielyn Laurea White  STATUTORY AGENT SIGNATURY  By the signature appearing below accepts the appointment as state acknowledges that the appointment agent or the statutory agent results. The person signing below declar contained within this document submitted in compliance with A Rielyn Laurea White  Rielyn Laurea White  UIRED - check only one:  Individual as statutory agent signing on behalf of myself as the statutory agent signing on behalf of myself as the statutory agent signing on behalf of myself as the statutory agent signing on behalf of myself as the statutory agent signing on behalf of myself as the statutory agent signing on statutory agent signing signing on statutory agent signing signin | Rielyn Laurea White  STATUTORY AGENT SIGNATURE:  By the signature appearing below, the individual or entity nare accepts the appointment as statutory agent for the entity nare acknowledges that the appointment is effective until the appointment or the statutory agent resigns, whichever occurs first. The person signing below declares and certifies under penalty contained within this document together with any attachment submitted in compliance with Arizona law.  Rielyn Laurea White  Rielyn Laurea White  The person signing below declares and certifies under penalty contained within this document together with any attachment submitted in compliance with Arizona law.  Rielyn Laurea White  The person signing below declares and certifies under penalty contained within this document together with any attachment submitted in compliance with Arizona law.  Rielyn Laurea White  The person signing agent: I am signing on behalf of myself as the individual behalf of |

### 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:<br>Fax: | Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 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.