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

APPLICATION FOR REGISTRATION OF FOREIGN LIMITED LIABILITY COMPANY

Please read Instructions <u>L025i</u>

1.	ENTITY TYPE – check only one to indicate the type of entity applying for registration:									
		LIMITED LIABILITY COMPANY PROFESSIONAL LIMITED LIABILITY COMPANY								
2. NAME IN STATE OR COUNTRY OF FORMATION (FOREIGN NAME) – enter the exact, truname of the foreign LLC:										
3.	NAME TO BE USED IN ARIZONA (ENTITY NAME) – identify the name the foreign LLC will use in Arizona by checking 3.1 or 3.2 (check only one), and follow instructions:									
3.1 Name in state or country of formation, with no changes or additio number 4 and continue.										
3.2 Fictitious name – check this if the foreign LLC's name in its state or countries formation is not available for use in Arizona or if that name does not contain identifier, and enter the name in number 3.3 below. NOTE – a resolution o company adopting the fictitious name must be attached to and submitted w form.										
	3.3	If you checked 3.2, enter or print the name to be used in Arizona:								
4.	in num	ESSIONAL LIMITED LIABILITY COMPANY SERVICES – if professional LLC is checked ber 1 above, describe the professional services that the professional LLC will provide ples: law firm, accounting, medical):								
5.	FOREI	GN DOMICILE – list the state or country in which the foreign LLC was formed:								
6.	DATE	OF FORMATION IN FOREIGN DOMICILE:								
7.		OSE OR GENERAL CHARACTER OF BUSINESS – describe or state the purpose of the LLC or the general character of the business it proposes to transact in Arizona:								

L025.002 Rev: 7/2017

8.	STAT	UTORY AGENT	IN AR	IZONA:					
	8.1	REQUIRED – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL - Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):				
tatu	tory Agent	Name (required)							
tten	tion (option	nal)			Attention (optional)				
ddress 1					Address 1				
ddre	ess 2 (optio	onal)			Address 2	(optional)			
ity			State	Zip	City		State	Zip	
	8.3	REQUIRED - the this Application			<u>ptance</u> fo	rm M002 must be	e submitte	ed along with	
		спіз Аррпсасіої	TTOT RE	gisti ation.					
).						ILE STREET ADD P. O. Box) of the			
	main	tained in its stat	e of org	janization, or, if		quired, of the for			
	its st	ate or country o	f organi	zation:					
		Attention (optional)							
		Address 1							
		Address 2 (optional)							
		City				State or	Zip		
		Country				Province			
Λ	OPTI	ONAL - ADIZO	NNA KN	OWN PLACE OI	E BLICTNI	ESS ADDDESS:			
	10.1	Is the Arizon of the statut				address the sam next page and co		treet address	
		or the statut	or, age.	_	_	number 10.2 and			
10.2 If you answered "no" to number 10.1, give the physical or str							eet addres	ss (not a P.O.	
		box) of the k	known p	lace of business	or the LL	c in Arizona:			
		Attention (optional)							
		Address 1							
		Address 2 (optional)							
		City				State or	7:-		
		City				Province	Zip		

COMPLETE NUMBER 11 OR NUMBER 12 - NOT BOTH.

11.	MANAGER-MANAGED LLC – <u>see Instructions L025i</u> – check this box ☐ if management of the LLC is vested in a manager or managers, and complete and attach the <u>Manager Structure</u> <u>Attachment form L040</u> . The filing will be rejected if it is submitted without the attachment.								
12.	MEMBER-MANAGED LLC − <u>see Instructions L025i</u> − check this box ☐ if management of the LLC is reserved to the members, and complete and attach the <u>Member Structure Attachment</u> form L041. The filing will be rejected if it is submitted without the attachment.								
13.	SIGNATURE: By checking the box marked "I accept" below, I acknowledge under penalty of law that this document together with any attachments is submitted in compliance with Arizona law.								
Cianata				Drinted Name	Data				
REQUIRED – check only one and fill in the corresponding blank if signing for an entity:									
I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named:				I am a Member of this member- managed LLC or I am signing for an entity member named:	I am a duly authorized agent for this LLC.				

Filing Fee: \$150.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section Expedited processing - add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007 All fees are nonrefundable - see Instructions. 602-542-4100 Fax:

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.