

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

AZO Management 2, LLC.

a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **01/08/2021** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on **01/29/2021**.



Brad Raffensperger

Brad Raffensperger
Secretary of State

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ARTICLES OF ORGANIZATION

OF

AZO MANAGEMENT 2 LLC

ARTICLE 1

The name of the LIMITED LIABILITY COMPANY is: AZO Management 2, LLC.

ARTICLE II

Management of the limited liability company is vested in one manager whose name and address is as follows:

ARTICLE III

The initial Organizer of the LLC shall consist of one (1) member whose name and address is as follows:

Malcolm Westveer

2414 Gwinn Drive

Norcross, GA 30071

IN WITNESS WHEREOF, the undersigned has executed the Articles of Organization.

This 31st day of December 2020



Malcolm Westveer

Member



Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817
sos.ga.gov

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TRANSMITTAL INFORMATION FORM
GEORGIA LIMITED LIABILITY COMPANY

IMPORTANT: Please provide the entity's primary email address when completing this form.

Primary Email Address: gmsnorcross@aol.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1.	LLC Name Reservation Number (If one has been obtained; if articles are being filed without prior reservation, leave this line blank.)				
	AZO Management 2 LLC				
	LLC Name (List exactly as it appears in articles.)				
2.	Malcolm Westveer				
	Name* of Person Filing Articles of Organization (Certificate will be emailed to this person at address listed below.)				
	2414 Gwinn Drive	Norcross	GA	30071	
	Address	City	State	Zip Code	
	gmsnorcross@aol.com			770-416-0478	
	Filer's Email Address			Telephone Number	
3.	2414 Gwinn Drive				
	Principal Office Mailing Address of LLC (Unlike registered office address, this may be a post office box.)				
	Norcross	GA	30071		
	City	State	Zip Code		
4.	Malcolm Westveer				
	Name* of Registered Agent in Georgia				
	2414 Gwinn Drive				
	Registered Office Street Address in Georgia (Post office box or mail drop not acceptable for registered office address.)				
	Norcross	Gwinnett	GA	30071	
	City	County	State	Zip Code	
	Registered Agent's Email Address				
5.	Name* and Address of Each Organizer (Attach additional sheets if necessary.)				
	Malcolm Westveer	2414 Gwinn Drive	Norcross	GA	30071
	Organizer	Address	City	State	Zip Code
	Organizer	Address	City	State	Zip Code
6.	Mail the following items to the Secretary of State at the above address:				
	1) This Transmittal Information Form;				
	2) The Articles of Organization; and				
	3) Filing fee of \$110.00 (\$100 filing fee + \$10 paper filing service charge) payable to Secretary of State. Filing fees are non-refundable.				
	I understand that this Transmittal Information Form is included as part of my filing, and the information on this form will be entered in the Secretary of State business entity database. I certify that the above information is true and correct to the best of my knowledge.				
					12-31-2020
	Signature of Authorized Person				Date
	Malcolm Westveer				
	Print Name*				

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.