

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

**ARTICLES OF INCORPORATION
NONPROFIT CORPORATION**

Read the Instructions C0111

1. **ENTITY NAME** - see Instructions C0111 for naming requirements - give the exact name of the corporation:

HORSES IN BAJA: EQUINE ASSISTED SERVICES, INC.

2. **CHARACTER OF AFFAIRS** - briefly describe the character of affairs the corporation initially intends to conduct in Arizona. **NOTE** that the character of affairs that the corporation ultimately conducts is not limited by the description provided.

SEE ATTACHED

3. **MEMBERS - check one:** The corporation WILL have members.
 The corporation WILL NOT have members.

4. **ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:**

- 4.1 Is the Arizona known place of business address the same as the **street address** of the statutory agent?

- Yes - go to number 5 and continue
 No - go to number 4.2 and continue

- 4.2 If you answered "No" to number 4.1, give the **physical or street address** (not a P.O. Box) of the known place of business of the corporation in Arizona:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

5. DIRECTORS - list the name and business address of each and every Director of the corporation. If more space is needed, check this box <input type="checkbox"/> and complete and attach the Director Attachment form C082 .						
LYNN LAZZARINI				TERESA G. RAAB		
Name 11862 S. FOOTHILLS BLVD #501				Name 9500 HARRITT ROAD		
Address 1				Address 1		
Address 2 (optional) YUMA		AZ	85367	Address 2 (optional) LAKESIDE		CA 92040
City	UNITED STATES	State or Province	Zip	City	UNITED STATES	State or Province
Country				Country		
BROOKE R. LAZZARINI				CAROL E. MOLHO		
Name 8758 NE WOLF ROAD				Name 270 WILDROSE TERRACE		
Address 1				Address 1		
Address 2 (optional) ELGIN		OK	73538	Address 2 (optional) BOLDER CREEK		CA 95006
City	UNITED STATES	State or Province	Zip	City	UNITED STATES	State or Province
Country				Country		
EDWARD RODRIGUES						
Name 120 S. CAROL BLVD				Name		
Address 1				Address 1		
Address 2 (optional) UPPER DARBY		PA	19082	Address 2 (optional)		
City	UNITED STATES	State or Province	Zip	City		State or Province
Country				Country		

6. STATUTORY AGENT - <i>see Instructions C011i</i>						
6.1 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:				6.2 OPTIONAL - mailing address in Arizona of statutory agent (can be a P.O. Box):		
LYNN LAZZARINI Statutory Agent Name (required)						
Attention (optional) 11862 S. FOOTHILLS BLVD #501				Attention (optional)		
Address 1				Address 1		
Address 2 (optional) City YUMA		AZ	85367	Address 2 (optional)		State Zip
City		State	Zip	City		State Zip
6.3 REQUIRED - the <i>Statutory Agent Acceptance</i> form M002 must be submitted along with these Articles of Incorporation.						

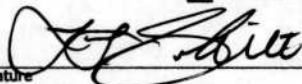
7. REQUIRED - you must complete and submit with the Articles a *Certificate of Disclosure*. The Articles will be rejected if the Certificate of Disclosure is not simultaneously submitted.

8. INCORPORATORS - list the **name and address**, and the **signature**, of each and every incorporator - minimum of one is required. If more space is needed, check this box and complete and attach the *Incorporator Attachment* form C084.

LYNN LAZZARINI
 Name
 11862 S. FOOTHILLS BLVD #501
 Address 1
 Address 2 (optional)
 YUMA AZ 85367
 City State Zip
 UNITED STATES
 Country

SIGNATURE - see *Instructions C0111*:
 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.

I ACCEPT


 Signature
 LYNN LAZZARINI
 Printed Name
 11/10/21
 Date

Name
 Address 1
 Address 2 (optional)
 City State Zip
 Country

SIGNATURE - see *Instructions C0111*:
 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.

I ACCEPT

Signature
 Printed Name
 Date

Expedited or Same Day/Next Day services are available for an additional fee - see Instructions or Cover sheet for prices.

Filing Fee: \$40.00 (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
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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.

**Attachment to Articles of Incorporation for
Horses In Baja: Equine Assisted Services, Inc.**

Article 2 Character of Affairs: The Character of affairs of the corporation will be:

A non-profit organization specifically will provide charitable giving to other qualifying nonprofit organizations.

Article 2 Purpose: The purposes for which the corporation is organized are:

- a. Horses In Baja: Equine Assisted Services, Inc. is organized for exclusively religious, charitable, educational and scientific purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under said Section 501(c)(3) of the Internal Revenue Code of 1986.
- b. Notwithstanding any other provision of these Articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law or by an organization, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future federal tax code.
- c. No substantial part of the activities of the corporation shall be carrying on propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publication or distribution of statements), any political campaign on behalf of any candidate for public office.
- d. No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof.
- e. Upon the dissolution of the corporation, the Board of Directors shall, after paying or making provision for payment of all the liabilities of the corporation, dispose of the residual assets of the corporation exclusively for exempt purposes of the corporation in such manner, or to one or more organizations which themselves are exempt as organizations described in Sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code of 1986 or corresponding Sections of any future Internal Revenue Code. Any such assets not so disposed of shall be disposed of by the Superior Court of the county in which the principal office of the corporation is then located, for such purposes or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Clear Form

Print Form

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STATUTORY AGENT ACCEPTANCE*Please read Instructions M0021*

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 Article of Incorporation):

HORSES IN BAJA: EQUINE ASSISTED SERVICES, INC.

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:

LYNN LAZZARINI

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 LYNN LAZZARINI Date 11/10/21

REQUIRED – check only one:

<input checked="" type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.	<input type="checkbox"/> Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.
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Filing Fee: none (regular processing)
Expedited processing – not applicable.
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission - Corporate Filings Section
1300 W. Washington St., Phoenix, Arizona 85007
Fax: 602-542-4100

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CERTIFICATE OF DISCLOSURERead the Instructions *C003i***1. ENTITY NAME** – give the exact name of the corporation in Arizona:HORSES IN BAJA: EQUINE ASSISTED SERVICES, INC.**2. FELONY/JUDGMENT QUESTIONS :**

Has any person (a) who is currently an officer, director, trustee, or incorporator, or (b) who controls or holds over ten per cent of the issued and outstanding common shares or ten per cent of any other proprietary, beneficial or membership interest in the corporation been:

2.1	Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the signing of this certificate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.2	Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven-year period immediately preceding the signing of this certificate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.3	Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven-year period immediately preceding the signing of this certificate, involving any of the following: a. The violation of fraud or registration provisions of the securities laws of that jurisdiction; b. The violation of the consumer fraud laws of that jurisdiction; c. The violation of the antitrust or restraint of trade laws of that jurisdiction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2.4	If any of the answers to numbers 2.1, 2.2, or 2.3 are YES , you MUST complete and attach a <i>Certificate of Disclosure Felony/Judgment Attachment form C004</i> .		

3. BANKRUPTCY QUESTION:

3.1	Has any person (a) who is currently an officer, director, trustee, incorporator, or (b) who controls or holds over twenty per cent of the issued and outstanding common shares or twenty per cent of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a twenty per cent interest in any other corporation (not the one filing this Certificate) on the bankruptcy or receivership of the other corporation ?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2	If the answer to number 3.1 is YES , you MUST complete and attach a <i>Certificate of Disclosure Bankruptcy Attachment form C005</i> .		

IMPORTANT: If within 60 days of the delivery of this Certificate to the A.C.C. any person not included in this Certificate becomes an officer, director, trustee or person controlling or holding over ten per cent of the issued and outstanding shares or ten per cent of any other proprietary, beneficial or membership interest in the corporation, the corporation must submit a SUPPLEMENTAL Certificate providing information about that person, signed by all incorporators or by a duly elected and authorized officer.

SIGNATURE REQUIREMENTS:	
Initial Certificate of Disclosure:	This Certificate must be signed by all incorporators. If more space is needed, complete and attach an <i>Incorporator Attachment</i> form C084.
Foreign corporations:	This Certificate may be signed by a duly authorized officer or by the Chairman of the Board of Directors.
Credit Unions and Loan Companies:	This Certificate must be signed by any 2 officers or directors.


LYNN LAZZARINI

Name
 11862 S. FOOTHILLS BLVD #501
 Address 1
 Address 2
 YUMA AZ 85367
 City State Zip
 Country UNITED STATES

SIGNATURE - see Instructions C003i:

By typing or entering my name and 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.

I ACCEPT

Signature 
 LYNN LAZZARINI
 Printed Name
 11/10/21
 Date

REQUIRED - check only one:

- Incorporator** - I am an incorporator of the corporation submitting this Certificate.
- Officer** - I am an officer of the corporation submitting this Certificate
- Chairman of the Board of Directors** - I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
- Director** - I am a Director of the credit union or loan company submitting this Certificate.

Name
 Address 1
 Address 2
 City State Zip
 Country

SIGNATURE - see Instructions C003i:

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I ACCEPT

Signature
 Printed Name
 Date

REQUIRED - check only one:

- Incorporator** - I am an incorporator of the corporation submitting this Certificate.
- Officer** - I am an officer of the corporation submitting this Certificate
- Chairman of the Board of Directors** - I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
- Director** - I am a Director of the credit union or loan company submitting this Certificate.

Filing Fee: None
 All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission - Corporate Filings Section
 1300 W. Washington St., Phoenix, Arizona 85007
 Fax: 602-542-4100

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