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

### **ARTICLES OF AMENDMENT**

Read the Instructions L015i

1. ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:

#### 2. A.C.C. FILE NUMBER:

Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations

# CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.

3. ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:

### 4. MEMBERS CHANGE (CHANGE IN MEMBERS) – <u>see Instructions L015i</u> – Use one block per person -To REMOVE a member - list the name only of the member being removed and check "Remove member."

To ADD a member - list the name and address of the member being added and check "Add member." To CHANGE ADDRESS only - list the name and NEW address and check "Address change."

To CHANGE NAME of existing member - list the current name, then the NEW name, and check "Name change." If more space is needed, complete and attach the <u>Amendment Attachment for Member form L044</u>.

Name currently shown in ACC records	Name currently shown in ACC records				
NEW Name	NEW Name				
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City State or Zip Province Zip	City State or Zip Province Country				
Address change       Add member         Name change       Remove member	Address change       Add member         Name change       Remove member				
Name currently shown in ACC records	Name currently shown in ACC records				
NEW Name	NEW Name				
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City State or Zip Province	City State or Zip Province				
Country	Country				
Address change Add member	Address change Add member				
Name change Remove member	Name change Remove member				

#### 5. MANAGERS CHANGE (CHANGE IN MANAGERS) – Use one block per person -

To REMOVE a manager - list the name only of the manager being removed and check "Remove manager."

To ADD a manager - list the name and address of the manager being added and check "Add manager." To CHANGE ADDRESS only - list the name and NEW address and check "Address change."

To CHANGE NAME of existing manager - list the current name, then the NEW name, and check "Name change."

If more space is needed, complete and attach the <i>j</i>	Amendment Attachment for Managers form L043.

Name currently shown in ACC records	Name currently shown in ACC records				
NEW Name	NEW Name				
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City State or Zip Province	City State or Zip Province				
Country	Country				
Address change Add manager	Address change Add manager				
Name change Remove manager	Name change Remove manager				

MANAGEMENT STRUCTURE CHANGE - see Instructions L015i - check only one box below and follow instructions. All persons will be listed on the appropriate Attachment form.

- CHANGING TO *MANAGER*-MANAGED LLC complete and attach the <u>Manager Structure Attachment</u> form L040. *The filing will be rejected if it is submitted without the attachment*.
- CHANGING TO *MEMBER*-MANAGED LLC complete and attach the <u>Member Structure Attachment</u> form L041. The filing will be rejected if it is submitted without the attachment.

7. 🗌 STATUTORY AGEN	T CHANGE	- NEW AGENT	APPOINTED – <u>see Instruct</u>	ions L015i <mark>:</mark>	
<ul> <li>7.1 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 NEW statutory agent:</li> </ul>			7.2 OPTIONAL - r NEW Statutor	nailing address i y Agent (can be	
Statutory Agent Name (required)			-		
Attention (optional)		Attention (optional)			
Address 1		Address 1			
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
<b>7.3</b> <i>REQUIRED</i> – the <u>St</u> Amendment.	atutory Age	ent Acceptance form I	M002 must be submitted alo	ong with these A	rticles of

# 8. STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT – complete 8.1 and/or 8.2:

8	8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent:			box) in Arizona of the existing statutory agent (can be a P.O. Box):				
Attention (optional)			Attention (op	tional)				
Address 1			Address 1					
Address	2(optional)			Address 2 (op	tional)			
City		State	Zip	City		State	Zip	

6.

#### 9. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:

- 9.1 Is the NEW Arizona known place of business address the same as the street address of the statutory agent?
  - Yes go to number 10 and continue
  - No go to number 9.2 and continue
- 9.2 If you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Perpetual     The LLC's life period will end on this date:(enter a date - mm/dd/yy)     The LLC's life period will end upon the occurrence of this event:    (describe an event		
Address 2 (optional)       State or Province       Zip         City	Attention (optional)	
City       State or Province       Zip         Cuntry       DURATION CHANGE - check one to indicate the NEW duration or life period of the LLC:         Perpetual       (enter a date - mm/dd/yy)         The LLC's life period will end on this date:       (enter a date - mm/dd/yy)         The LLC's life period will end upon the occurrence of this event:       (describe an event         (describe an event       (describe an event         (changing to a PROFESSIONAL LLC - number 12 must also be completed.       (changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).         PROFESSIONAL SERVICES CHANGE - describe the NEW type of professional services the professional LLC will render:       If an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.         GNATURE:       By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law.         I I ACCEPT         gnature       Printed Name       Date (mm/dd/yy)         QUIRED - check only one and fill in the corresponding blank if signing for an entity:       This is a member or I am signing for an entity	Address 1	
Country     Province     OURATION CHANGE - check one to indicate the NEW duration or life period of the LLC:     Perpetual     The LLC's life period will end on this date:	Address 2 (optional)	
DURATION CHANGE - check one to indicate the NEW duration or life period of the LLC:   Perpetual   The LLC's life period will end on this date:   The LLC's life period will end on the occurrence of this event:   (describe an event)   Changing to a PROFESSIONAL LLC - number 12 must also be completed.   Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).   PROFESSIONAL SERVICES CHANGE - describe the NEW type of professional services the professional LLC will render:   OTHER AMENDMENT - if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.   GNATURE: By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law.   I I ACCEPT    Panter Mame Date (mm/dd/yy)   This is a manager-managed LLC and I am signing for an entity:   This is a manager of I am signing for an entity:   This is a member or I am signing for an entity	City State or Zip Province	
Perpetual             Perpetual          The LLC's life period will end on this date:	Country L	
Inte LLC's life period will end on this date:	<b>DURATION CHANGE</b> – check one to indicate the <b>NEW</b> duration or life period of the LLC:	
<ul> <li>The LLC's life period will end upon the occurrence of this event:         <ul> <li>The LLC's life period will end upon the occurrence of this event:</li></ul></li></ul>	Perpetual Perpetual	
<pre></pre>	The LLC's life period will end on this <b>date</b> : (enter a date – mm/dd/yy)	
ENTITY TYPE CHANGE - if changing entity type, check one and follow instructions: Changing to a PROFESSIONAL LLC - number 12 must also be completed. Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC). PROFESSIONAL SERVICES CHANGE - describe the NEW type of professional services the professional LLC will render: OTHER AMENDMENT - if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment. GNATURE: By checking the box marked "I accept" below, I acknowledge <i>under penalty of perjury</i> that this document together with any attachments is submitted in compliance with Arizona law. I ACCEPT QUIRED - check only one and fill in the corresponding blank if signing for an entity: This is a manager-managed LLC and I am signing for an entity	The LLC's life period will end upon the occurrence of this <b>event</b> :	
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Changing to a PROFESSIONAL LLC – number 12 must also be completed. Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC). PROFESSIONAL SERVICES CHANGE – describe the NEW type of professional services the professional LLC will render: OTHER AMENDMENT – if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment. GNATURE: By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law. I I ACCEPT gnature Printed Name Date (mm/dd/yy) QUIRED – check only one and fill in the corresponding blank if signing for an entity: This is a manager-managed LLC and I am signing individually as a manager or I am signing for an entity		
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together with any attachments is submitted in compliance with Arizona law.  I ACCEPT  Printed Name Date (mm/dd/yy)  QUIRED – check only one and fill in the corresponding blank if signing for an entity: This is a manager-managed LLC and I am signing This is a manager or I am signing for an entity		, the
gnature       Printed Name       Date (mm/dd/yy)         QUIRED – check only one and fill in the corresponding blank if signing for an entity:       This is a manager-managed LLC and I am signing         This is a manager-managed LLC and I am signing       This is a member-managed LLC and I am signing         individually as a manager or I am signing for an entity       Individually as a member or I am signing for an entity		ent
QUIRED – check only one and fill in the corresponding blank if signing for an entity:         This is a manager-managed LLC and I am signing         Individually as a manager or I am signing for an entity	I ACCEPT	
QUIRED – check only one and fill in the corresponding blank if signing for an entity:         This is a manager-managed LLC and I am signing         Individually as a manager or I am signing for an entity		
This is a <b>manager-managed LLC</b> and I am signing individually as a <b>member-managed LLC</b> and I am signing for an <b>entity</b> individually as a <b>member or</b> I am signing for an <b>entity</b>		i/yy)
$egin{array}{llllllllllllllllllllllllllllllllllll$	<b>QUIRED</b> – check only one and fill in the corresponding blank if signing for an entity:	
	$ot$ individually as a <b>manager or</b> I am signing for an <b>entity</b> $igee$ individually as a <b>member or</b> I am signing for an $oldsymbol{\epsilon}$	

All fees are nonrefundable - see Instructions.	Fax:	602-542-4100				
Please be advised that A.C.C. forms reflect only the minimum provisions requi	red by statu	te. You should seek	private legal counsel for	or those matters t	hat may per	tain
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.

Expedited processing – add \$35.00 to filing fee.

1300 W. Washington St., Phoenix, Arizona 85007