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JAN 14 2014

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

AZ Corp. Commission



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**LLC STATEMENT OF CHANGE
OF KNOWN PLACE OF BUSINESS ADDRESS OR STATUTORY AGENT**

Read the Instructions L020i

NOTE – no matter what is being changed, numbers 1, 2, 3.1, 4.1, and 4.2 must be completed. The form will be rejected if those sections are not completed.

1. **ENTITY NAME** – give the exact name of the LLC as currently shown in A.C.C. records:
ROBERT BRUCE AND ASSOCIATES, LLC

2. **A.C.C. FILE NUMBER:** L-1781382-0

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>

3. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

3.1 REQUIRED – list the known place of business address currently shown in A.C.C. records (before any changes):

Attention (optional)
2225 E SANTA CRUZ DR

Address 1

Address 2 (optional)

GILBERT

AZ

85234

City

State

Zip

3.2 Optional – List the NEW known place of business address in Arizona (must be a street or physical address):

Attention (optional)

Address 1

Address 2 (optional)

City

State

Zip

3.3 If you completed 3.2, is the NEW known place of business address in Arizona the same as the street address of the statutory agent? ☐ Yes ☐ No

4. CURRENT OR EXISTING STATUTORY AGENT – list the name and addresses of the statutory agent as shown in the records of the Arizona Corporation Commission *before any changes* (this is the existing statutory agent):

4.1 REQUIRED – list the **name** and **physical or street address** (not a P.O. Box) in Arizona of the existing statutory agent:

CORPORATE AGENTS OF ARIZONA LLC

Statutory Agent Name

Attention (optional)

1830 E BROADWAY BLVD STE 124

Address 1

Address 2 (optional)

TUCSON

AZ

85719

City

State

Zip

4.2 REQUIRED – list the **mailing address** (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:

Attention (optional)

Address 1

Address 2 (optional)

City

State

Zip

- 4.3** ☐ **CHANGE IN EXISTING STATUTORY AGENT NAME ONLY** – if the *name only* of the existing statutory agent listed in number 4.1 above has changed, but a new agent has not been appointed, check the box and give the new name of the existing statutory agent below:

- 4.4** **CHANGE IN EXISTING STATUTORY AGENT ADDRESS** – check all that apply and follow instructions:

- ☐ **STREET ADDRESS CHANGED** – complete number 4.5.
☐ **MAILING ADDRESS CHANGED** – complete number 4.6.

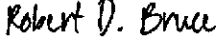
4.5 NEW STREET ADDRESS – give the NEW physical or street address (not a P.O. Box) in Arizona of the existing statutory agent:			4.6 NEW MAILING ADDRESS – give the NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):		
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip

5. ☒ NEW STATUTORY AGENT – if a new statutory agent is being appointed, check the box and complete the following for the NEW statutory agent :					
5.1 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:			5.2 OPTIONAL – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):		
UNITED STATES CORPORATION AGENTS, INC.					
Statutory Agent Name					
Attention (optional) 17470 N PACESETTER WAY			Attention (optional)		
Address 1			Address 1		
Address 2 (optional) SCOTTSDALE City			Address 2 (optional) AZ State		
85255 Zip			City		
			State		
			Zip		
5.3 REQUIRED – if you are appointing a new statutory agent, the <u>Statutory Agent Acceptance</u> form M002 must be submitted along with this Statement of Change form.					

SIGNATURE – see *Instructions L020i* for who is authorized to make changes:

If the person signing this form is the existing statutory agent changing its own address, then by the signature appearing below, the existing statutory agent certifies *under penalty of perjury* that he or she has given the LLC named in number 1 above written notice of the address change.

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.

DocuSigned by:  Signature 50317B207BA144C...	☒ I ACCEPT Robert D. Bruce Printed Name	12/3/2013 Date
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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 Statutory Agent changing only my own address and/or my own name.
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Filing Fee: \$5.00 (regular processing) Expedited processing – add \$35.00 to filing fee. 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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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.



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

STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

1. **ENTITY NAME** – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent:

ROBERT BRUCE AND ASSOCIATES, LLC

2. **A.C.C. FILE NUMBER** (if entity is already incorporated or registered in AZ): L-1781382-0

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>

3. **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):

UNITED STATES CORPORATION AGENTS, INC.

- 3.1 **Check one box:** ☐ The statutory agent is an **Individual** (natural person).
☒ The statutory agent is an **Entity**.

STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 3 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

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 ACCEPT

DocuSigned by:

Adam Thomas

11/19/2013

Signature

4AB22878747847B...

Printed Name

Date

REQUIRED – check only one:

- | | |
|---|--|
| ☐ Individual as statutory agent: I am signing on behalf of myself as the individual | ☒ 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. |
|---|--|

Filing Fee: none (regular processing)
Expedited processing – (**available only if this form is submitted by itself**) add \$35.00 to filing fee.
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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