MAR 2 5 2014



FILE NO. 4-1284333-5

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

ARTICLES OF AMENDMENT

						Read the	Instruc	tions <u>L015i</u>			
1.	ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records:										
	Kr	ystal Klear	Inve	stments	, LLC						
2.		.C. FILE NU		R:	284333-5		·	<u> </u>			
									nttp://www.a	cc.gov/Divisi	ons/Corporations
) EACH CH 'ED INFOR			ADE AND HAT CHANG	iE.		
3.								me of the LLC i		below:	
		CoKeA, L									
4.		information in that member	SHOV for tha r. FO	VN IN A.C St membe R NEW MI	C.C. RECORDS - Fr (new name a EMBERS In a	· list the name nd/or address) separate bloc	of each me , then chec :k. list the	mber being chang ik all boxes that a	ged, and belo apply to indica (Name black	w that provid ate the chang and give the	e being made for
Kel	ly Aı	nderson					Corev	D. Anderson			
Nam	e curre	ntly shown in AC	C reco	rds		· · · · · · · · · · · · · · · · · · ·		rrently shown in AC	C records		
	Name				·		NEW Nat	ne			
	E. L	a Donna Dr					609 E La Donna Dr				
Addr	633 1						Address	1			
	_	optional)	-		A.7		Address	2 (optional)		T	
Ten City	ipe ,				AZ	85283	Tempe	;		AZ	85283
City	ł	UNITED S	TAT	ES	State or Province	Zip	City	UNITED ST	TATES	State or Province	Zip
Coun	try						Country			·	
\mathbf{Z}	Addr	ess change		Add as	20% or more	e member	₩ Ac	ldress change	☐ Add	as 20% or r	nore member
	Name change Add as less than 20% member			☐ Name change ☐ Add as less than 20% member							
				Remov	e member				Rem	ove membe	Г
Name	curren	itly shown in ACC	recor	ds			Name cui	rently shown in ACC	records		·
NEW	Name						NEW Nan	ne .		<u> </u>	
Addre	ess 1					· - · · <u>- · · · · · · · · · · · · · · · · </u>	Address :				
	-										
Addre	ıss 2 (o	ptional)					Address 2	(optional)			
City	ſ		:		State or Province	Zip	City			State or	ΖΊρ
Count	ry			_	. 1941108		Country			Province	
		ess change		Add as	20% or more	e member	l	dress change	□ Add =	s 2006 or ~	nore member
		e change			less than 209	****	=	me change	_		20% member
_		-	$\overline{\Box}$		e member				_	ve member	· ·

	that manager (new nam FOR NEW MANAGERS -	t the name e and/or ac in a sepa ra	of each manager bein idress), then check all ate block. list the nar	g changed, and below that provide any r boxes that apply to indicate the change ne in the NEW Name blank and give the attach the <u>Amendment Attachment for New York</u>	new informat being made address, and	tion for for that manager. d check the			
Valle A	ndaraan		,	C D. A1			\neg		
1.	nderson			Corey D. Anderson Name currently shown in ACC records			_		
				Trains carrainly shown in sice records			1		
NEW Name				NEW Name	NEW Name				
609 E La Donna Dr			609 E La Donna Dr						
Address 1				Address 1					
Address 2 ((antional)			Address 2 (optional)					
Tempe	(Abaoual)	AZ	85283	Tempe	AZ	85283			
City		— State o		City	State or	Zip	\dashv		
	UNITED STATES	Provinc	28	UNITED STATES	Province				
Country				Country					
₩ Add	lress change 🔲 Add	as mana	ger	Address change Add	as manage	≘ r			
Nan Nan	ne change 🔲 Ren	nove mana	ager	Name change Rem	ove manag	jer –			
7. 7.1	form L040. The CHANGING TO A The filing will be STATUTORY AGENT REQUIRED - give the	filing will IEMBER-N rejected CHANGE name (d	be rejected if it is so IANAGED LLC — con if it is submitted with - NEW AGENT can be an individual		ture Attach	hment form L041.			
Shahatan As	(not a P.O. Box) in A agent:		r street address the NEW statutory	NEW Statutory Agent			-		
	(not a P.O. Box) in A agent: gent Name (required)								
Statutory Ag	(not a P.O. Box) in A agent: gent Name (required)			NEW Statutory Agent					
	(not a P.O. Box) in A agent: gent Name (required)								
Attention (o	(not a P.O. Box) in A agent: gent Name (required) ptional)			Attention (optional)					
Attention (o	(not a P.O. Box) in A agent: gent Name (required) ptional)			Attention (optional)			-		
Address 1 Address 2 (a	(not a P.O. Box) in A agent: gent Name (required) ptional)	rizona of	the NEW statutory	Attention (optional) Address 1 Address 2 (optional) City	t (can be a	P.O. Box):			
Address 1 Address 2 (a	(not a P.O. Box) in A agent: gent Name (required) ptional)	rizona of	the NEW statutory	Attention (optional) Address 1 Address 2 (optional)	t (can be a	P.O. Box):			
Address 1 Address 2 (a	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED - the Stat Amendment.	state utory Age	zip nt Acceptance form	Attention (optional) Address 1 Address 2 (optional) City	State	Zip			
Address 1 Address 2 (a City 7.3	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED - the Stat Amendment.	State utory Age	zip nt Acceptance form S CHANGE - ADDI	Attention (optional) Address 1 Address 2 (optional) City M002 must be submitted along with	state h these Art	Zip ticles of mplete 8.1			
Address 1 Address 2 (or City 7.3	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED - the Stat Amendment. STATUTORY AGENT and/or 8.2: NEW physical or str (not a P. O. Box) in A	State utory Age	zip nt Acceptance form S CHANGE - ADDI	Attention (optional) Address 1 Address 2 (optional) City M002 must be submitted along with RESS OF CURRENT STATUTORY A	state h these Art	Zip ticles of mplete 8.1			
Address 1 Address 2 (or City 7.3	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED - the Stat Amendment. STATUTORY AGENT and/or 8.2: NEW physical or str (not a P. O. Box) in A statutory agent:	State utory Age	zip nt Acceptance form S CHANGE - ADDI	Attention (optional) Address 1 Address 2 (optional) City M002 must be submitted along with RESS OF CURRENT STATUTORY A	state h these Art	Zip ticles of mplete 8.1			
Attention (o) Address 1 Address 2 (o) City 7.3 8. 8.	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED - the Stat Amendment. STATUTORY AGENT and/or 8.2: NEW physical or str (not a P. O. Box) in A statutory agent:	State utory Age	zip nt Acceptance form S CHANGE - ADDI	Attention (optional) Address 1 Address 2 (optional) City M002 must be submitted along with RESS OF CURRENT STATUTORY A 8.2 NEW mailing addrestatutory agent (can	state h these Art	Zip ticles of mplete 8.1			
Attention (op Address 1 Address 2 (of City 7.3 8. Attention (op Address 1	(not a P.O. Box) in A agent: gent Name (required) ptional) REQUIRED — the Stat Amendment. STATUTORY AGENT and/or 8.2: NEW physical or str (not a P. O. Box) in Al statutory agent:	State utory Age	zip nt Acceptance form S CHANGE - ADDI	Attention (optional) Address 1 Address 2 (optional) City M002 must be submitted along with RESS OF CURRENT STATUTORY A 8.2 NEW mailing addrestatutory agent (can Attention (optional)	state h these Art	Zip ticles of mplete 8.1			
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9. 💹	ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:										
9.1	.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 o	continue									
9.2	9.2 If you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the place of business of the LLC in Arizona:										
	Attention (optional)										
	609 E La Donna Dr										
	Address 1										
	Address 2 (optional)										
	Tempe		AZ	85283							
	City UNITED STATES	s	State or Province	Zip							
10. 🔲	DURATION CHANGE - check one t	to indicate the NEW durat	ion or life p	eriod of the LLC:							
	Perpetual										
	The LLC's life period will end or	n this date:	(enter a date – mm/dd/vv)							
	The LLC's life period will end up										
		•		(describe an event)							
				(describe all event)							
11. 🔲	ENTITY TYPE CHANGE - if changing	ng entity type, check one	and follow i	nstructions:							
	Changing to a PROFESSIONAL	HC ~ number 12 must ak	o be compl	leted .							
	Changing to a NON-PROFESSIO		-								
		since and (protestional act	o occoming	a regular LEC/.							
12. 🗌	PROFESSIONAL SERVICES CHANG render:	GE - describe the NEW ty	pe of profe	ssional services the professional LLC will							
13. 🗌	OTHER AMENDMENT — if an amen you must attach to these Articles of	dment was made that was Amendment a complete co	not addres	ssed by the check boxes on this form, then LC's written amendment.							
SIGNATU	JRE: By checking the box marked together with any attachmen	nts is submitted in complian	vledge <i>unde</i> nce with Ari	er penalty of perjury that this document izona law.							
.1		I ACCEPT									
	2 audusni	Kelly Anderso	n	03/22/14							
Signature		Printed Name		Date (mm/dd/yy)							
	D - check only one and fill in the cor			·							
indir	is a manager-managed LLC and I vidually as a manager or I am signin nager named:	ng for an entity ind	is is a men lividually as ember nan	nber-managed LLC and I am signing s a member or I am signing for an entity ned:							
	Lelly andusm	<u>ノ</u> [
	, ,										
	e: \$25.00 (regular processing)	Mail: Arizo	ona Corpora	ation Commission - Corporate Filings Section							
	d processing – add \$35.00 to filing fe are nonrefundable - see Instructions.	e. 130		ngton St., Phoenix, Arizona 85007							

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,