AUG 2 9 2014



FILE NO. L-18721080

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

ARTICLES OF AMENDMENT Read the Instructions <u>L015i</u>						
1. ENTITY NAME ~ give the exact name of the LLC as currently shown in A.C.C. records:						
Exquisite Air Services LLC						
2. A.C.C. FILE NUMBER:						
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) — see Instructions 1.015i — Use one block per person - FOR MEMBERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each member being changed, and below that provide any new information for that member (new name and/or address), then check all boxes that apply to indicate the change being made for that member. FOR NEW MEMBERS - in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, complete and attach the Amendment Attachment for Members form L044.						
Anthony R. Simmon. Name currently shown in ACC records	s Sr.	Ajana M. Namecurrently shown in ACC	Simmons			
NEW Name		NEW Name				
15435 W. Mescal St		15435 W. Mescal St Address 1				
		A.J				
Address 2 (optional)		Address 2 (optional)				
Surprise State or Province P	12 85379	Supris	State or Province A2 8537 9			
Country Address change Add as 20% or more member Name change Add as less than 20% member Remove member		Country Address change Add as 20% or more member Name change Add as less than 20% member Remove member				
Bretton A Juy Name currently shown in ACC records		Christina M. Joy Name currently shown in ACC records				
7109 w. Julie Dr		NEW Name 7109 W. Julie Dr				
Address 1		Address 1	June Di			
Address 2 (aptional)		Address 2 (optional)				
Glendale State or Province	42 ^{zip} 85308		e State or Province A2 85308			
Country Address change Add as 20% or n	nore member	Country Address change	Add as 20% or more member			
Name change Add as less than		Name change	Add as less than 20% member			

5. 🔽	IN A.C.C. RECORDS - list that manager (new name FOR NEW MANAGERS - in	the name a and/or ada a separa	of each manager being dress), then check all b i te block, list the name	 Use one block per person changed, and below that provoxes that apply to indicate the in the NEW Name blank and in ttach the <u>Amendment Attachm</u> 	ide any nev change be give the ad	w information ing made for dress, and	on for or that manager. check the	
Anthony R. Simmons Sr Name currently shown in ACC records			Ajana M. Simmons Name currently shown in ACC records					
NEW Name 15435 W. Mcscal St Address 1			15435 W. Mescal st					
Address 2 (o	ptional)			Address 2 (optional)				
City	Surprise	State of Province		Country Surprise		State or Province	Z 85379	
=	Address change Add as manager Name change Remove manager			Address change Add as manager Name change Remove manager				
 MANAGEMENT STRUCTURE CHANGE - see Instructions L015i - check only one box below and follow instructions: CHANGING TO MANAGER-MANAGED LLC - complete and attach the Manager Structure Attachment form L040. The filing will be rejected if it is submitted without the attachment. CHANGING TO MEMBER-MANAGED LLC - complete and attach the Member Structure Attachment form L041. The filing will be rejected if it is submitted without the attachment. 								
7.	STATUTORY AGENT	CHANGE	- NEW AGENT	APPOINTED - <u>see Instruc</u>	tions L01	5i;		
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:		7.2 OPTIONAL - mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):						
Statutory Age	ent Name (required)		Park of the Political Control of the Political					
Attention (optional)		Attention (optional)						
Address 1				Address 1				
Address 2 (o	ptional)	,		Address 2 (optional)				
City		State	Zip	City		State	Zip	
7.3	REQUIRED - the Stat Amendment.	utory Age	nt Acceptance form	M002 must be submitted a	long with	these Art	icles of	
8. 🗍	STATUTORY AGENT and/or 8.2:	ADDRES	S CHANGE – ADDR	ESS OF CURRENT STATU	JTORY AC	SENT - co	mplete 8.1	
8.1	NEW physical or str (not a P. O. Box) in A statutory agent:			8.2 NEW mailin statutory ag			na of the existing Box);	
Attention (op	itional)			Attention (optional)	······································			
Address 1				Address 1				
Address 2(or	otional)			Address 2 (optional)				
City		State	Zip	City		State	Zip	

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:					
	Attention (optional)					
	Action (optional)					
	Address 1					
	Address 2 (optional)					
	City State or Zip					
	Province					
	Country					
	DUDATION CHANGE - chack and to indicate the NEW duration or life period of the LLC.					
10. 📙	DURATION CHANGE - check one to indicate the NEW duration or life period of the LLC:					
	Perpetual 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)					
11. 🗍	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).					
12. 🔲	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 have as this form, then					
13. 📙	OTHER AMENDMENT — If an amendment was made that was not addressed by the check boxes on this form, then you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.					
	you must allow to drop of must all the analysis say, or and allow a more announced					
SIGNATI	JRE: By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document					
J10117111	together with any attachments is submitted in compliance with Arizona law.					
Λ	↑ I ACCEPT					
-I, $ $	Christina M. Joy 08/28/2014					
	Christina 11.30y 08/28/2014					
Signature	Printed Name / Date (mm/dd/yy) /					
	ED - check only one and fill in the corresponding blank if signing for an entity:					
	s is a manager-managed LLC and I am signing vidually as a manager or I am signing for an entity This is a member-managed LLC and I am signing for an entity					
1111411	nager named:					
	e: \$25.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section					
	ed processing – add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007					
All lees	are nonrefundable - see Instructions. Fax: 602-542-4100					

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.

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION COVER SHEET

AUG 2 9 2014

USE A SEPARATE COVER SHEET FOR EACH DOCUMEN TRIZONA CORP. COMMISSION

ARE YOU FILING: New Entity Change	ge to existing entity	Re-submission/Correction					
PLEASE COMPLETE ALL APPROPRIATE SECTIONS Type in Comp/LLC Name: Exquisite Air Services							
FILING TYPE	REGULAR SERVICE FEE	EXPEDITED SERVICE FEE					
Articles of Domestication	\$100.00	\$135.00					
Articles of Incorporation (Profit)	\$ 60.00	\$ 95.00					
Articles of Incorporation (Non Profit)	\$ 40.00	\$ 75.00					
Articles of Organization (Limited Liability Company)	\$ 50.00	\$ 85.00					
Application For Authority (Business)	\$175.00	\$210,00					
Application to Conduct Affairs (Non Profit)	\$175.00	\$210.00					
Application for New Authority	\$175.00	\$210.00					
	\$150,00	\$185,00					
Application for Registration							
Articles of Amendment	\$ 25.00	× \$ 60.00					
Articles of Amendment & Restatement	\$ 25.00	\$ 60.00					
Articles of Correction	\$ 25,00	\$ 60,00					
Articles of Merger/Share Exchange	\$100.00	\$135.00					
Articles of Merger (Limited Liability Company)	\$ 50,00	\$ 85.00					
Affidavit of Publication	\$ 0.00	\$ 35.00					
CORPORATIONS Comissed Comisses	\$5.00 Each	\$40.00					
CORPORATIONS -Certified Copies* "If copies are for different entities the Expedite fee applies to each entity	(Enter Quantity)	() (Enter Quantity)					
at cobies are for unistalit surface me exhaust as abbues on sacin anath	(Chier Quantity)	() (Enter Quantity)					
LLCs - Certified Copies*	\$10.00 Each	\$45.00					
"If copies are for different entities the Expedite fee applies to each entity	() (Enter Quantity)	() (Enter Quantity)					
Good Standing Certificate* "If Good Standing Certificates are for different entities the Expedite fee applies	\$10.00 Each	\$45.00					
"If Good Standing Certificates are for different entities the Expedite fee applies to each entity	() (Enter Quantity)	() (Enter Quantity)					
Other:	Regular Fee	Expedite Fee					
SELECT PAYMENT TYPE: DO NOT WRITE YOUR CRE	DIT CARD NUMBER ON TH	IIS FORM!					
Check Check #	Check # Check Amount \$						
M.O.D. Account MOD Acct #	Mod Amoui	nt \$					
Cash for in-person filings only (Do not send cash	 -	unt \$					
Credit Card for in-person filings only CC Amount \$							
No fee required							
REQUIRED - SELECT ONE RETURN DELIVERY OPTION: Mail Pick Up Fax # ()							
PLEASE PRINT E-MAIL ADDRESS CLEARLY:							
XE-mail: Christina. joy @ exquisite A	tirlle.com						
For Mail or Pick Up - Please list the person or company wh		mpleted documents.					
DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK).							
· · · · · · · · · · · · · · · · · · ·							
Person or Company Name: Phone Number:							
Address:							
		· · · · · · · · · · · · · · · · · · ·					
City: State:	Zip						
FOR ARIZONA CORPORATION COMMISSION USE ONLY PICK-UP BY: DATE:							