AZ CORPORATION COMMISSION FILED

AZ Corp. Commission

MAR 3 0 2015

FILE NO. <u>L1943/267</u>

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

						FICLES C Read the Ir		MENDMENT tions <u>L015i</u>	Γ				
1.	ENT	ITY NAME -	give	the exa	ct name of th	ne LLC as curr	ently si	nown in A.C.C. red	cords:				
	LO	TUS POOL	CLE	ANING	G, HUC a	nd Repa	ic .	LLC					
2.	A.C.	C. FILE NUM	BER	L194	31267			our website at: htt	p://www.	azcc.gov/Divisio	ons/Corporations		
						ANGE BEII MATION F		ADE AND HAT CHANGE					
3.		ENTITY NA	ME C	HANGI	E – type or pr	int the exact (NEW na	ime of the LLC in	the spac	e below:			
4.	4. MEMBERS CHANGE (CHANGE IN MEMBERS) – <u>see Instructions L015i</u> – 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 <u>Amendment Attachment for Members</u> form L044.												
ERI	N W	ILSON											
Name	currer	itly shown in ACC	record	ls			Name o	urrently shown in ACC	records				
NEW	Name						NEW Na	ame					
		AMALFI A	VE										
Addre	Address 1						Address 1						
Addn	ess 2 (d	ptional)					Address	s 2 (optional)					
City Vaci	copa	UNITED ST	ATF	es 🔽	State or Province AZ	Zip 85\38	City			State or Province	Žip		
Coun	try. Δddr	ess change		Add as	20% or more	memher	Country	ddress change	□ Δd	d as 20% or r	nore member		
		Address change Add as 20% or more member Name change Add as less than 20% member						Name change Add as less than 20% member					
_		-	<u></u>	Remov	e member			-	Re	move membe	r		
Name	Name currently shown in ACC records						Name currently shown in ACC records						
NEW	NEW Name						NEW Name						
Addr	Address 1						Address 1						
Addn	ess 2 (c	optional)		····			Address	s 2 (optional)					
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	Hall	e change			ress than 20 re member	70 IIIEIIDEI	│	Name change		u as iess than move membe			

5. MANAGERS CHANGI IN A.C.C. RECORDS - list that manager (new name FOR NEW MANAGERS - i	the name of and/or add	f each manager bein ress), then check all t e block. list the nar	g chan boxes ne in ti	ged, an that ap ie NEW	d below that p ply to indicate Name blank a	provide the ch and give	any nev ange be the ad	w information eing made for idress, and cl	n for r that manager. neck the
appropriate box. If mor	e space is ne	eeded, complete and	attach	the An	nendment Atta	chmen	t for Ma	inagers form	L043.
			812.00		tly shown in ACC	- racord			
Name currently shown in ACC records			Mair	ie correi	tly shown in Act	L FECUTO	•		
NEW Name		<u> </u>	NEV	Name					
Address 1			Add	ress 1					
Address 2 (optional)			Add	ress 2 (c	ptional)			<u> </u>	
City	State or Province		City				T-T	State or Province	Zip
Country	Province	· · · · · · · · · · · · · · · · · · ·	Cou	ntry	·		لنا		
	as manag	er			ess change	П	Add a	s manager	
= - =	nove mana				e change			ve manage	r
7. STATUTORY AGENT 7.1 REQUIRED – give the or an entity) and pi (not a P.O. Box) in it	e name (c	an be an individua	al l		2 OPTIONA	4L - m	ailing		
agent:				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		-		-	
Attention (optional)			A	tention	optional)				
Address 1			 	idress 1					
Address 1									
Address 2 (optional)			1		(optional)				
7.3 REQUIRED – the Sta	State tutory Age	nt Acceptance for		ty)2 mus	t be submitt	ted alo	ng witl	State h these Art i	cles of
8. STATUTORY AGENT and/or 8.2:	ADDRES	S CHANGE - ADI	DRES!	OF C	URRENT ST	ATUT	ORY A	AGENT - co	mplete 8.1
8.1 NEW physical or s (not a P. O. Box) in statutory agent:				8				ess in Arizo be a P.O. I	na of the existing
Attention (optional)	,		7	ttention	(optional)	•••			
Address 1			- '	ddress 1					
Address 2(optional)		<u> </u>		ddress 2	(optional)				
City	State	Zip	(ity	200			State	Zip

State NEW Arizona known place of business address the same as the street address of the statutory agent?				1 PLACE O						
No - go to number 9.2 and continue	9.1						ess the s	same as the str	eet address	of the statutory agent?
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: Address 2 (optional)		=								
Address 2 (optional) Address 2 (optional) Or DURATION CHANGE - check one to indicate the NEW duration or life period of the LLC: Perpetual		∐ No	- go to i	number 9.2	! and conti	inue				
Address 1 Address 2 (optional) DIVATION CHANGE - check one to indicate the NEW duration or life period of the LLC:	9.2	If you ans	wered "N usiness o	o" to numb f the LLC ir	per 9.1, gi n Arizona:	ve the NE \	W phys	ical or street a	address (no	t a P.O. Box) of the known
Address 2 (optional) City										
Address 2 (optional) City		Atter	tion (optiona	il)						
D. 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:		Addn	:ss 1							
DURATION CHANGE — check one to indicate the NEW duration or life period of the LLC: Perpetual		Addr	ss 2 (option	al)						
DURATION CHANGE — check one to indicate the NEW duration or life period of the LLC: Perpetual		City					nonco-			
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:							₹		Zip	
Perpetual The LLC's life period will end on this date:		Coun								
(describe an event) Image: Entity type Change = if changing entity type, check one and follow instructions: Changing to a PROFESSIONAL LIC = number 12 must also be completed. Changing to a NON-PROFE SEPORTILE (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 arrend tent was made that was not addressed by the check boxes on this form, then you must attach to these Artist are moment a complete copy of the LLC's written amendment. IGNATURE: 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	у. у	Perp	etual LLC's life	period will	end on th	is date: _				
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