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AZ Corp. Commission 05006910

JAN 2 7 2015

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

AMORNA CORP. COMMISSION COMPORATIONS DIVISION



HINT POR

DO NOT WRITE ABOVE THES LINE; RESERVED FOR ACC USE ONLY. LLC STATEMENT OF CHANGE OF KNOWN PLACE OF BUSINESS ADDRESS OR STATUTORY AGENT

Read the Instructions L020!

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. RECEIVED

ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records: MAR 2 0 2015 BUILDING BLOCKS 1015, LLC

2. A.C.C. FILE NUMBER: L-0750573-0 ARIZONA CORP. COMMISSION Find the A.C.C. No number on the Upper corner or man decuments use on washing of http://www.azez.gov/uvvatale/corporateles/

3 ARIZONA KNO	NN PLACE OF	BUSINESS	ADDRESS:		
3.1 REQUIRED - list the known place of business address currently shown in A.C.C. records (before any changes):			3.2 Optional - List the NEW known place of business address in Arizona (must be a street or physical address):		
Allentien (optional)			Attantion (syllenes)	#3	
8400 S KYRENE RD	#124		700 N DOBSON RD	#3	
Address 2 (optional)	AZ	85284	Address 2 (systems)	AZ	85224
CBy TEMPE	State	2 1p	Oby CHANDLER	State	De .
3.3 If you complete the street address	ted 3.2, is the ess of the statu	NEW known itory agent?	place of business addre Yes No	ess in Arizona	the same as

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:			l (if c	QUIRED — list to one exists in A. he existing Sta	C.C. records) in Arizon	18	
Stickery	Agent Rome							
Altention	(aptional)	<u> </u>		Alturition (op	ional)			
Address				Address 1				
Address	2 (optional)		<u> </u>	Address 2 (o)	tional)			
City		Stata	Zbp	СКУ		State		

	the existin agent has	g statutoi not been	rv agent lister	rory AGENT NAM in number 4.1 abo neck the box and given	e has ch	anged, bl	ıt a new
4,4	CHANGE IN E		STATUTOR	Y AGENT ADDRES	S – check	all that u	pply
				ED — complete num GED — complete nu		,	
phys	V STREET ADOR sice) or street add rizona of the exist	ress (not	a P.O. Box)	4.6 NEW MAXLE mailing addr statutory age	ess in Ariz	ona of the	e existing
Attention (option	NPT)			Attention (optional)	 		
Addres 1		·		Address 1	<u></u>		<u></u>
Address 2 (appl	(AST)			Aggress 2 (aptions)		· · · · · · · · · · · · · · · · · · ·	
Clov		State	239	City		25-20-	Ze
8.1 <i>REQ</i> Indiv	IEW STATUTOR nd complete the f UIRED - give the vidual or an entity et address (not a ne NEW statutory	name (cr) and phy P.O. Box	for the NEW : in be an vsical or	atutory agent is be statutory agent: 5.2 OPTIONAL - NEW Statuto	mailing ac	ddress in	Arizona of
30 C	E HEN SIGNOOFY	eyent.					
of the	LAW GROUP PL	LC					
of the DURFEE States of Special Attacks on Copyline	Name	IC		Attention (optional)	, <u> </u>		
of the DURFEE States of Special Attacks on Copyline	Nume	LC		Attention (optional) Address 1			
Of the DURFEE STATE OF COPE OF	GLEY RD #127	AZ	85206				

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 compilance with Arizona law.

0.1 . 0 18 h	I ACCEPT DEBORAH SHANK, TR	CUSTEE CAM.5 JOIS
Deborah Shank	Printed Name	SUSTEE Jan 5, 2015
FOUTPER - check only one and fi	ill in the corresponding blank if signi	ing for an entity:
FEARTHER - CHOCK AND AND THE		-
I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named:	I am a Mamber of this member- managed LLC or I am signing for an entity member nemed:	I am a Statutory Agent changing only my own address and/or my own name.

Filing Fee: \$5.00 (regular processing) Expedited processing - add \$35.00 to filing fee.	Mall:	Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions.	Fex:	602-542-4100

Please he advised that A.C.C. forms reflect only the minimum previous required by statute. You should seek private ingel exuted for those regitars that may partially

to the manyands nesse or your manner. All decuments filed with the Artsums Corporation Commission are public record and are open for public inspection. If you have quantions after resoling the instructions, please call 602-542-3026 or (within Arizane only) 800-345-5819.





DO NOT WRITE ABOVE TRIS LINE; RESERVED FOR ACCUSE ONLY.

STATUTORY AGENT ACCEPTANCE

	Please read Instructions M0021					
1.	ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):					
	BUILDING BLOCKS 1015, LLC					
	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). NOTE - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:					
	DURFEE LAW GROUP PLLC					
3,	By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first. The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law. RICHARD E DURFEE JR					
	RICHARD E DURFEE JR 1-23-15 Printed Name Deta					
RE	QUIRED - check only one: Individual as statutory agent: I am E Entity as statutory agent: I am signing on					
	Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.					
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l B	ling Fee: none (regular processing) pedited processing - not applicable. If fees are nonrefundable - see Instructions. Mail: Artzona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Artzona 85007 Fax: 602-542-4100					
	the natural that A.C.C. former collect each the techniques provisions required by statute. You should seek private legal coursed for those motions that may partial					

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