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AZ Corp. Commission

MAY 0 1 2015

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

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

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

Read the Instructions L020i

<b>NOTE</b> – 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.									
	. ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records: YOUR TAX MATTERS LLC								
2.	A.C.C. FILE NUMBER: L11940799 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	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):					
Attenti	on (optional)			Attentio	Attention (optional)				
2651	W GUADALUPE RD 1	05			2131 E BROADWAY RD STE 4				
Addres				Address					
Addres	s 2 (optional)	ΑZ	85202	Address	2 (optional)	AZ	85282		
City I	MESA	State	Zip	<sub>City</sub> 7	TEMPE	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?									
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:			4.2 REQUIRED – list the mailing address (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:						
SUMIKO GLENN Statutory Agent Name									
Attention (optional)			Attention (optional)						
15255 S 31ST ST									
Address 1			Address 1						
Addre	ss 2 (optional)	AZ	85048	Address	s 2 (optional)				

City

CItyPHOENIX

State

State

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:							
	ANGE IN E		STATUTOR	Y AG	ENT ADDRESS – che	ck all that a	apply	
	<del></del>				complete number 4.5.  - complete number 4.			
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)  2131 E BROAD  Address 1	WAY RD ST	ГЕ 4		Attentio	on (optional)			
Address 2 (optional) TEMPE		AZ	85282	Addres	s 2 (optional)			
City		State	Zip	City		State	Zip	
and com	plete the fo	llowing for	the <b>NEW</b>	statut	ry agent is being appo cory agent:	<u></u>		
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:			<b>5.2</b> OPTIONAL - mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):					
Statutory Agent Name								
Attentioπ (optional)				Attention (optional)				
Address 1				Address	1			
Address 2 (optional)				Address	2 (optional)			
City		State	Zíp	City		State	Zip	
_	•		_		y agent, the <u>Statutory</u> tement of Change fori	-	<u>eptance</u>	

## 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.

**▼** I ACCEPT

Signature Signature	Sumiko G	Glenn 04/28/2015		
REQUIRED – check only one and	fill in the corresponding blank if sigr	ning 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 <b>Member</b> of this member- managed LLC or I am signing for an entity member named:	I am a <b>Statutory Agent</b> changing only my own address and/or my own name.		
Filing Fee: \$5.00 (regular processing) Expedited processing – add \$35.00 to filing		n Commission - Corporate Filings Section on St., Phoenix, Arizona 85007		

Fax: 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.

602-542-4100

All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.

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All fees are nonrefundable - see Instructions.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.