MAY 1 9 2015



ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

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

LLC STATEMENT OF CHANGE OF MANAGER OR MEMBER ADDRESSES

Read the Instructions L021i

- 1. ENTITY NAME give the exact name of the LLC as currently shown in A.C.C. records: Beyond Stone Solutions LLC
- 2. A.C.C. FILE NUMBER: L-1762315-4

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. MANAGER ADDRESSES – for each manager being changed, list the name and address as currently shown on A.C.C. records and then give the new address for that manager. If more space is needed, submit another Statement of Change form. If the person is also a member, also list their name, address, and new address in the Member Addresses section.

NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Name 1					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City Country	City Country State Zip				
NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Name 2					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City Country State Zip	City Country State Zip				
NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Name 3					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City State Zip Country	City Country				
NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Name 4					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City Country	City State Zip Country				

MEMBER ADDRESSES - for each member being changed, list the name and address as currently shown on A.C.C. records 4, and then give the new address for that member. If more space is needed, submit another Statement of Change form. If the person is also a manager, also list their name, address, and new address in the Manager Addresses section.

NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Elisabeth Brewer					
Name 1					
7330-17 E Palo Verde Dr	Address 1 Address 1				
	Unit 14				
Address 2 (optional)	Address 2 (optional)				
Scottsdale	Chandler				
City UNITED STATES A 7 85250	City UNITED STATES AZ 85224				
Country UNITED STATES AZ 85250	Country ONTED STATES AZ 85224				
NAME AND ADDRESS BLFORE CHANGES.					
Name 2					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
City State Zip	City State Zip				
Country	Country State Zip				
NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:				
Name 3					
Address 1	Address 1				
Address 2 (optional)	Address 2 (optional)				
	City City Zip				
City State Zip					
Country 2000 Count	Country NEW ADDRESS ONLY:				
Name 4					
Address 1	Address 1				
10 L may					
Address 2 (optional)	Address 2 (optional)				
City State Zip	City State Zip				

. SIGNATURE:

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 Breiser 5-15-15 Date isabeth

REQUIRED - check only one and fill in the corresponding blank if signing 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 Member of this member-managed LLC or I am signing for an entity member named:			
Filing Fee: \$5.00 (regular processing)	Mail:	Arizona Corporation Commission - Corporate Filings Section			

Expedited processing – add \$35.00 to filing fee.	_	1300 W. Washington St., Phoenix, Arizona 85007
All fees 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.

MEMBER ADDRESSES - for each member being changed, list the name and address as currently shown on A.C.C. records and then give the new address for that member. If more space is needed, submit another Statement of Change form. If the person is also a manager, also list their name, address, and new address in the Manager Addresses section.

NAME AND I	ADDRESS BEFORE CHANGES			NEW ADDRE	SS ONLY:		
Nume 1			- <u>-</u>				
768/THE 1.			-				
Address 1			······································	Address 1			
Address 2 (d	potione)		· · · · · · · · · · · · · · · · · · ·	Address 2 (4	ptional)		
Chiy		State	Zp	City		State	2lø
Country	ADDRESS BEFORE CHANGES:			Country NEW ADDR			L
Name 2							
Address 1				Address 1			
Address 2 (options)		Address 2 (optional)					
City		Sinte	Zp	City		State	Zip
			· · · · · · · · · · · ·	Country			l
NAME AND	ADDRESS BEFORE CHANGES:			NEW ADOR	ISS CRILY:		
			<u></u>				
Name 3							
Address 1				Address 1			
Address 2 (0010000			Address 2 (optional)		
City		State	Zip	Oky		State	Zip
Country	ADDRESS BEFORE CHANGES:	[<u>}</u>	Country I			L
	ADDRESS DEFORE CITATOLS;						
Name 4				1			
				<u> </u>			
Address 1		Address 1					
Address 2 (optional)		Address 2 (optional)					
City	調整	State	Zip	City		State	Zip
Country				Country	A REAL PROPERTY AND A REAL	iit	L

SIGNATURE: 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 Brewer 4-1-15 Elisabeth Brewe abeth

REQUIRED - check only one and fill in the corresponding blank if signing for an entity:

I am the individual Manager of this manager-managed	I am a Hember of this member-managed LLC or I am
LLC or I am signing for an entity manager named:	signing for an entity member named:
Filing Ever: \$5.00 (regular processing)	II: Arizona Corporation Commission - Corporate Filings Section

Filing Fee: \$5.00 (regular processing) Expedited processing - add \$35,00 to filing fee.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructions,	Fax: 602-542-4199

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