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Affizona corp. Commission Corporations division

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

Read the Instructions L020i

**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.

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1.	ENTITY NAME - give the exact name of the	E LLC as currently shown in A.C.C. records:
	DAMA Properties DAMA	Ventures
2	A.C.C. FILE NUMBER: L 190	29019
		ents OR on our website at: http://www.azcc.gov/Divisions/Corporations
3.	ARIZONA KNOWN PLACE OF BUSINESS	ADDRESS:
3.1	REQUIRED – list the known place of business address currently shown in A.C.C.	3.2 Optional - List the NEW known place of business address in Arizona (must be a
	records (before any changes):	street or physical address):
Attent	on (optional)	Attention (optional)
· · · · · ·	5 412 W. EL CortesTA	8611 W. Weldon Ave
Addres	s i	Address 1
Addres	s 2 (optional)	Address 2 (optional)
City	Phx AZ 8508	Gity Phx State 7 5503
3.3	If you completed 3.2, is the NEW known the street address of the statutory agent?	place of business address in Arizona the same as  Yes No
4.	CURRENT OR EXISTING STATUTOR' statutory agent as shown in the records of the changes (this is the existing statutory agent).	Y AGENT – list the name and addresses of the ne Arizona Corporation Commission before any ):
4.1		4.2 REQUIRED – list the mailing address
	or street address (not a P.O. Box) in	(if one exists in A.C.C. records) in Arizona
	Arizona of the existing statutory agent:	of the existing Statutory Agent:
Statut	ory Agent Name	
		same
Attent	ion (optional)	Attention (optional)
Addre	412 W. El Corley trl	Address 1
	,	7001039 A
Addre	ss 2 (optional)	Address 2 (optional)
City	state Signal State Signal Sign	City State Zip

· 4.3	the existing	g statutory not been ap	agent listed pointed, ch	d in nu	AGENT NAME ( Imber 4.1 above ne box and give	e has cl	hanged, bu	ıt a new
	and follow instr	ructions:			omplete numbe			pply
physica	TREET ADDRI al or street add ona of the exist	ress (not a	P.O. Box)	4.6	<b>NEW MAILING</b> mailing address statutory agent	s in Ari	zona of the	e existing
Attention (optional)  Address 1	511 W.	weld	landue	Attentio Address	n (optional)  8611	υ.ι	velde	ju Avl
Address 2 (optional)	~×>	At 2	8503g	Address	2 (optional)		AZ State	85037
and	<b>W STATUTOR</b> complete the form  RED – give the	ollowing for	the <b>NEW</b>	statut	ry agent is being ory agent: OPTIONAL – ma			
individu street a	ual or an entity address (not a l NEW statutory	) and physi P.O. Box) ir	cal or		NEW Statutory			
Statutory Agent Nam	SKU	rdal	<u></u>		same	_		
Attention (optional)  Address 1	IW.	weld	en Av	Attentio Address	n (optional)	. <u>.</u>		
Address 2 (optional)	hx_	A2 State	\$5037	City	2 (optional)		State	Zip
5.3 REQUI	<i>IRED</i> – if you a 1002 must be s	re appointir abmitted a	ng a new st Iong with tl	atutor nis Sta	y agent, the <u>Sta</u> Itement of Chan	<u>itutory</u> ge forr	<u>Agent Acc</u> n.	<u>eptance</u>

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• 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.

_		
	ACCEPT ACCEPT	
Ch X D 1 4	Joles Fundary	Dec (, 2015
Signature	Printed Name	Date /

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

I am the individual <b>Manager</b> of this manager-managed LLC <b>or</b> I am signing for an <b>entity manager named:</b>	I am a <b>Member</b> of this member- managed LLC <b>or</b> I am signing for an <b>entity member named</b> :	Jam a <b>Statutory Agent</b> changing only my own address and/or my own name.
	1	<u> </u>

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
All lees are non-clandable see motivations.		

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.

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## STATUTORY AGENT ACCEPTANCE

	Please read Instructions M002i
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):
2.	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:
3.	STATUTORY AGENT SIGNATURE:
	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.
CI	Dale Stundell lec/201
	QUIRED - check only one:  Individual as statutory agent: I am
	signing on behalf of myself as the individual behalf of the entity named as statutory agent,
L	(natural person) named as statutory agent. and I am authorized to act for that entity.

Arizona Corporation Commission - Corporate Filings Section Mail: Filing Fee: none (regular processing) 1300 W. Washington St., Phoenix, Arizona 85007 Expedited processing - not applicable. All fees are nonrefundable - see Instructions. 602-542-4100 Fax:

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