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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISIONARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

AZ Corp. Commission



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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***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.**1. ENTITY NAME** – give the exact name of the LLC as currently shown in A.C.C. records:NRV ENTERPRISES, LLC**2. A.C.C. FILE NUMBER:** 214517023Find 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 REQUIRED** – list the known place of business address currently shown in A.C.C. records (before any changes):

Attention (optional)

1000 S MILTON ROAD

Address 1

Address 2 (optional)

City FLAGSTAFFState AZZip 86001**3.2 Optional** – List the NEW known place of business address in Arizona (must be a street or physical address):

Attention (optional)

Address 1

Address 2 (optional)

City

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? ☐ Yes ☐ No**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:CT CORPORATION SYSTEM

Statutory Agent Name

Attention (optional)

3800 N. CENTRAL AVE

Address 1

SUITE 460

Address 2 (optional)

City PHOENIXState AZZip 85012**4.2 REQUIRED** – list the **mailing address** (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:

Attention (optional)

3800 N. CENTRAL AVE

Address 1

SUITE 460

Address 2 (optional)

City PHOENIXState AZZip 85012

- 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:

- 4.4** **CHANGE IN EXISTING STATUTORY AGENT ADDRESS** – check all that apply and follow instructions:

- ☐ **STREET ADDRESS CHANGED** – complete number 4.5.
☐ **MAILING ADDRESS CHANGED** – complete number 4.6.

| | | | | | |
|--|--|-------|---|--|-------|
| 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) | | | Attention (optional) | | |
| Address 1 | | | Address 1 | | |
| Address 2 (optional) | | State | Address 2 (optional) | | State |
| City | | Zip | City | | Zip |

5. ☒ **NEW STATUTORY AGENT** – If a new statutory agent is being appointed, check the box and complete the following for the **NEW statutory agent**:

| | | | | | |
|--|--|-------|--|--|-------|
| 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: | | | 5.2 OPTIONAL – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box): | | |
| Statutory Agent Name Jamie B. Vickroy | | | | | |
| Attention (optional) | | | Attention (optional) | | |
| Address 1 | | | Address 1 | | |
| Address 2 (optional) | | State | Address 2 (optional) | | State |
| City | | Zip | City | | Zip |

5.3 REQUIRED – If you are appointing a new statutory agent, the Statutory Agent Acceptance form M002 must be submitted along with this Statement of Change form.

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

Jamie B. Vickroy
Signature

Jamie B. Vickroy
Printed Name

Jan. 3, 2016
Date

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

| | | |
|---|---|--|
| <input type="checkbox"/> I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named: | <input type="checkbox"/> I am a Member of this member-managed LLC or I am signing for an entity member named: | <input checked="" type="checkbox"/> 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. All fees are nonrefundable – see Instructions. | Mail: Arizona Corporation Commission – Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 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.

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):

NRV ENTERPRISES, LLC

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:

JAMIE B VICKROY

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.

Jamie B. Vickroy
Signature

Jamie B. Vickroy
Printed Name

Jan. 03, 2016
Date

REQUIRED – check only one:

| | |
|---|---|
| <input checked="" type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent. | <input type="checkbox"/> Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity. |
|---|---|

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

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COMMISSIONERS
SUSAN BITTER SMITH - Chairman
BOB STUMP
BOB BURNS
DOUG LITTLE
TOM FORESE



JODI JERICH
Executive Director

PATRICIA L. BARFIELD
Director
Corporations Division

ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION
1300 West Washington
Phoenix, Arizona 85007-

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FEB 22 2016

**ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION**

NRV ENTERPRISES, LLC
JAMIE B VICKROY
119 MOONLIT TRL

FLAGSTAFF, AZ 86005

Effective Date: 01/11/2016
File No: L-1951702-3

Received Date: 01/06/16

We have received a document submission for the above-referenced entity. If an acceptable form of payment for the correct filing fee was received, it has been deposited and is nonrefundable pursuant to statute, unless otherwise noted below. The document is REJECTED and is being returned for the following reasons:

Required Signature Authorization. Please check the appropriate box under the signature for authorization.

IMPORTANT INFORMATION:

FORMS ARE AVAILABLE AT THE CORPORATIONS DIVISION WEB SITE
<http://ecorp.azcc.gov>

To successfully process your document and avoid further delays, it is imperative that you return the following information to the Corporations Division.

1. A copy of this letter and all pages of the rejected document.
2. The corrected document, a NEW Cover Sheet, plus any additional paperwork or filing fees, as required within this letter.

If you do not owe any additional fees or are paying by MOD account you can email your resubmission packet as a pdf document attachment to documentintake@azcc.gov.

TO SUBSCRIBE TO THE ANNUAL REPORT EMAIL REMINDER SERVICE, GO ONLINE TO <http://ecorp.azcc.gov>. USE THE SERVICE FEATURE AND SELECT "SUBSCRIBE TO EMAIL REMINDER TO FILE ANNUAL REPORT." YOU CAN ALSO SUBSCRIBE USING THE SEARCH FEATURE TO FIND YOUR CORPORATION'S RECORD, THEN CLICK ON THE BUTTON FOR "ANNUAL REPORT EMAIL REMINDERS." IF YOU CHOOSE NOT TO SUBSCRIBE, YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

Tell us how we are doing. Take the online customer service survey at

www.azcc.gov/divisions/Corporations.

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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

1. WHAT ARE YOU FILING?

☐ New Entity ☒ Change to existing entity ☐ Re-submission/Correction

2. ENTITY NAME:

NRV ENTERPRISES, LLC

3. CALCULATE YOUR FEES (copies, certificate of good standing and expedited processing are all optional):

| | | |
|---|--------------------------|------------------|
| Document filing fee (fees are listed on the bottom of the form or on the fee schedule) | Subtotal: | 5 ⁰⁰ |
| Do you want EXPEDITED processing? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, add \$35.00 | Subtotal: | 35 ⁰⁰ |
| <input type="checkbox"/> Corporation certified copies \$ 5.00 each x (enter number of copies requested) | Subtotal: | |
| <input type="checkbox"/> LLC certified copies \$10.00 each x (enter number of copies requested) | Subtotal: | |
| <input type="checkbox"/> Certificate of Good Standing \$10.00 each x (enter number of copies requested) | Subtotal: | |
| TOTAL YOUR AMOUNT OWED | TOTAL AMOUNT DUE: | 40 ⁰⁰ |

4. PAYMENT METHOD:

☐ MOD Account #**Cash** - do not mail cash. Cash may be used only for in-person submittals.**Checks or money orders** - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. **UNACCEPTABLE CHECKS** include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or check numbers; temporary checks (new accounts).**Credit cards** - may be used for in-person submittals, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa, MasterCard, and American Express.

5. REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):

| | |
|--|---|
| <input type="checkbox"/> Email | Email address: |
| <input type="checkbox"/> Pick up | Name: Phone: |
| <input checked="" type="checkbox"/> Mail | Name: NRV ENTERPRISES, LLC d.b.a. Chick-fil-A Flagstaff |
| | Address: 1000 S. Milton Road |
| | City: Flagstaff State: AZ Zip: 86001 |
| | Phone: 928-864-6220 |

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY:

DATE:

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf

