

MAR 21 2016

MAR 28 2016

FILE NO. L-19552750

FILE NO. L19552750

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

ARTICLES OF AMENDMENT

Read the Instructions L0151

1. **ENTITY NAME** - give the exact name of the LLC as currently shown in A.C.C. records:

OAKMONT F&B LLC

2. **A.C.C. FILE NUMBER:** L19552750

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>

CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.

3. ☐ **ENTITY NAME CHANGE** - type or print the exact NEW name of the LLC in the space below:

4. ☒ **MEMBERS CHANGE (CHANGE IN MEMBERS)** - *see Instructions L0151* - Use one block per person - FOR MEMBERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each member being changed, and below that provide any new information for that member (new name and/or address), then check all boxes that apply to indicate the change being made for that member. FOR NEW MEMBERS - in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, complete and attach the Amendment Attachment for Members form L044.

TIMOTHY PACATTE <small>Name currently shown in ACC records</small>				JARED FIELD <small>Name currently shown in ACC records</small>			
NEW Name PO BOX 11188 <small>Address 1</small>				NEW Name PO BOX 11188 <small>Address 1</small>			
<small>Address 2 (optional)</small> SCOTTSDALE <small>City</small>		AZ <small>State or Province</small>	85271 <small>Zip</small>	<small>Address 2 (optional)</small> SCOTTSDALE <small>City</small>		AZ <small>State or Province</small>	85271 <small>Zip</small>
<small>Country</small> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member		<input type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input checked="" type="checkbox"/> Remove member		<small>Country</small> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member		<input type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input checked="" type="checkbox"/> Remove member	
PLATED PROJECTS LLC <small>Name currently shown in ACC records</small>				<small>Name currently shown in ACC records</small>			
NEW Name 13 N SAN FRANCISCO ST <small>Address 1</small>				NEW Name <small>Address 1</small>			
<small>Address 2 (optional)</small> STE 200 FLAGSTAFF <small>City</small>		AZ <small>State or Province</small>	86001 <small>Zip</small>	<small>Address 2 (optional)</small> <small>City</small>		<small>State or Province</small>	<small>Zip</small>
<small>Country</small> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input type="checkbox"/> Remove member		<input type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input type="checkbox"/> Remove member		<small>Country</small> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input type="checkbox"/> Remove member		<input type="checkbox"/> Add as 20% or more member <input type="checkbox"/> Add as less than 20% member <input type="checkbox"/> Remove member	

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5. ☒ **MANAGERS CHANGE (CHANGE IN MANAGERS)** - Use one block per person - FOR MANAGERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each manager being changed, and below that provide any new information for that manager (new name and/or address), then check all boxes that apply to indicate the change being made for that manager. FOR NEW MANAGERS - in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, complete and attach the Amendment Attachment for Managers form L043.

TIMOTHY PACATTE Name currently shown in ACC records			JARED FIELD Name currently shown in ACC records		
NEW Name PO BOX 11188 Address 1			NEW Name PO BOX 11188 Address 1		
Address 2 (optional) SCOTTSDALE		AZ	85271		
City	UNITED STATES	State or Province	Zip		
Country			Country		
<input type="checkbox"/> Address change	<input type="checkbox"/> Add as manager				
<input type="checkbox"/> Name change	<input checked="" type="checkbox"/> Remove manager				

6. ☐ **MANAGEMENT STRUCTURE CHANGE** - see Instructions L015i - check only one box below and follow Instructions:
- ☐ **CHANGING TO MANAGER-MANAGED LLC** - complete and attach the Manager Structure Attachment form L040. The filing will be rejected if it is submitted without the attachment.
- ☐ **CHANGING TO MEMBER-MANAGED LLC** - complete and attach the Member Structure Attachment form L041. The filing will be rejected if it is submitted without the attachment.

7. ☒ **STATUTORY AGENT CHANGE - NEW AGENT APPOINTED** - see Instructions L015i:

7.1 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:			7.2 OPTIONAL - mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):		
PLATED PROJECTS LLC Statutory Agent Name (required)					
Attention (optional) 13 N SAN FRANCISCO STREET			Attention (optional)		
Address 1 STE 202			Address 1		
Address 2 (optional)		AZ	86001		
City	FLAGSTAFF	State	Zip		
7.3 REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment.					

8. ☐ **STATUTORY AGENT ADDRESS CHANGE - ADDRESS OF CURRENT STATUTORY AGENT** - complete 8.1 and/or 8.2:

8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent:			8.2 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)			Address 2 (optional)		
City		State	Zip	City	State
					Zip

Clear Form

Print Form

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

AMENDMENT ATTACHMENT FOR MANAGERS

1. **ENTITY NAME-** give the exact name of the LLC as currently shown in A.C.C. records:
OAKMONT F&B LLC

2. **A.C.C. FILE NUMBER:** **L19552750**

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. **Check one box only to indicate what document the Attachment goes with:**

☒ Articles of Amendment ☐ Articles of Amendment to Application for Registration

4. **MANAGERS CHANGE (CHANGE IN MANAGERS)** - use one block per person - FOR MANAGERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each manager being changed, and below that provide any new information for that manager (new name and/or address), then check all boxes that apply to indicate the change being made for that manager. FOR NEW MANAGERS - in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, use another Amendment Attachment for Managers form.

RYAN FIELD Name currently shown in ACC records			BRIAN TERPAY Name currently shown in ACC records		
NEW Name 2420 S WOODLANDS VILLAGE BLVD Address 1			NEW Name 2420 S WOODLANDS VILLAGE BLVD Address 1		
Address 2 (optional) FLAGSTAFF AZ 86001 City State or Province Zip			Address 2 (optional) FLAGSTAFF AZ 86001 City State or Province Zip		
Country <input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove manager			Country <input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove manager		
PLATED PROJECTS LLC Name currently shown in ACC records			Name currently shown in ACC records		
NEW Name 13 N SAN FRANCISCO STREET Address 1			NEW Name Address 1		
Address 2 (optional) STE 202 FLAGSTAFF AZ 86001 City State or Province Zip			Address 2 (optional) City State or Province Zip		
Country <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager			Country <input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager		

9. ☐ **ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:**

9.1 Is the NEW Arizona known place of business address the same as the street address of the statutory agent?

- ☐ Yes - go to number 10 and continue
☐ No - go to number 9.2 and continue

9.2 If you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

10. ☐ **DURATION CHANGE** - check one to indicate the NEW duration or life period of the LLC:

- ☐ Perpetual
☐ The LLC's life period will end on this date: _____ (enter a date - mm/dd/yy)
☐ The LLC's life period will end upon the occurrence of this event:

_____ (describe an event)

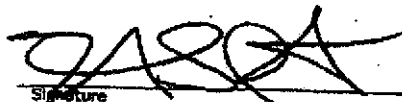
11. ☐ **ENTITY TYPE CHANGE** - If changing entity type, check one and follow instructions:

- ☐ Changing to a PROFESSIONAL LLC - number 12 must also be completed.
☐ Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).

12. ☐ **PROFESSIONAL SERVICES CHANGE** - describe the NEW type of professional services the professional LLC will render:

13. ☐ **OTHER AMENDMENT** - If an amendment was made that was not addressed by the check boxes on this form, then you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.

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.


Signature

☒ I ACCEPT

TIMOTHY PACATTE

Printed Name

3/15/16

Date (mm/dd/yy)

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

<input checked="" type="checkbox"/> This is a manager-managed LLC and I am signing individually as a manager or I am signing for an entity manager named: _____	<input type="checkbox"/> This is a member-managed LLC and I am signing individually as a member or I am signing for an entity member named: _____
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Filing Fee: \$25.00 (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.

Clear Form

Print Form

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

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):

OAKMONT F&B LLC

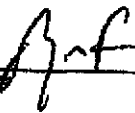
2. **STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

PLATED PROJECTS LLC

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.

Signature 

RYAN FIELD

Printed Name

3/15/2016

Date

REQUIRED – check only one:

☒ **Individual as statutory agent:** I am signing on behalf of myself as the individual (natural person) named as statutory agent.

☐ **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

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.
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COMMISSIONERS
DOUG LITTLE - Chairman
BOB STUMP
BOB BURNS
TOM FORESE
ANDY TOBIN



JODI JERICH
Executive Director

PATRICIA L. BARFIELD
Director
Corporations Division

ARIZONA CORPORATION COMMISSION

OAKMONT F&B LLC
2380 N OAKMONT DR.

FLAGSTAFF, AZ 86004

Effective Date: 03/28/2016
File No: L-1955275-0

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 being returned for the following reasons:

Before the Commission can file this document you must correct the Statutory Agent Acceptance page.
There is an Entity listed as the new Statutory Agent in #7.
Correct #2 and check the correct box below the signature line on the Statutory Agent page.

Update and re-submit

IMPORTANT INFORMATION:

Follow the instructions below to resubmit your document. If you originally paid for expedited processing, the resubmitted document will be processed within the current posted expedited time frame after we receive the resubmission, and no additional fees are owed. If you originally paid for regular processing time, the resubmitted document will be processed within the current posted regular time frame after we receive the resubmission, and no additional fees are owed. If you want to upgrade from regular processing to expedited processing, then you can pay the \$35.00 expedite fee when you resubmit the document.

Please Note: Limited Liability Companies must return the corrected document within thirty (30) calendar days of the rejection date to retain the original file date.

- 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, NEW Cover Sheet, plus any additional paperwork or filing fees, as requested 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.

If you have any questions, please feel free to contact the Customer Service Call Center at 602-542-3026, or Arizona residents only may use the toll free number 800-345-5819.

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 CORPORATION COMMISSION CORPORATIONS DIVISION

MAR 28 2016

COVER SHEET

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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:

Oakmont F&B 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:	
Do you want EXPEDITED processing?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, add \$35.00	Subtotal:
<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:	<input checked="" type="checkbox"/>

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 checked="" type="checkbox"/> Email	Email address: office@platedprojects.com		
<input type="checkbox"/> Pick up	Name:	Phone:	
<input type="checkbox"/> Mail	Name:		
	Address:		
	City:	State:	Zip:
	Phone:		

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

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PREPARED BY: _____ DATE: _____

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

