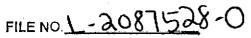
- MAY 1 6 2016





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

#### **ARTICLES OF AMENDMENT**

				AN	Read the 1			•		
1.	ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records:									
	Kas	ash King Properties, LLC								
2.	A.C.	C. FILE NUM	IBER: L20	875280						
							ur website at: <u>ht</u>	p://www.az	cc.gov/Divisions	s/Corporations
				DEACH CH TED INFOR			DE AND AT CHANGE	F.		
3.	ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:									
4.		MEMBERS CHANGE (CHANGE IN MEMBERS) — <u>see Instructions L015i</u> — 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 <u>Amendment Attachment for Members</u> form L044.								
							Zuniga			
	zumen Zuni	tly shown in ACC ora	records			Name curr	ently shown in ACC	records		
NEW I		<u>5"                                     </u>				NEW Name	<u> </u>			
10784 W Prickly Pear Trail Address 1					10784 W Prickly Pear Trail Address 1					
Addre	ss 2 (o	ptional)		1		Address 2	(optional)			
Peor	ia _			AZ State or	85383 Zip	Peoria			AZ State or	85383
		JNITED ST	ATES 🕏	Province		<u> </u>	UNITED ST.	ATES 💌	Province	Zip
Count	•	b		- 2004		Country				
		ess change	=	s 20% or more		Address change Add as 20% or more member  Add as less than 20% member				
LJ	Name change Add as less than 20% member  Remove member					L   Na	me change		as less than 2 ove member	0% member
										· · · · · · · · · · · · · · · · · · ·
Pete Zuniga Sr Name currently shown in ACC records					Brandyn Asbury Name currently shown in ACC records					
HOHE	CONTEN	dy shown in ACC	records			Marine Curr	enuy snown in ACC	recorgs		
NEW Name					NEW Name					
	7337 W Caribbean Lane					7337 W Address 1	Caribbean L	ane		<u></u>
						risti cus t				
	-	ptional)	•	AZ	85381	Address 2	(optional)		A 77	05004
Peop				State or	Zip	Peoria			AZ State or	85381 Zip
	UNITED STATES Province					l l	JNITED STA	TES 💌	Province	· 
	Country Add as 20% or more member				Country  Address change Add as 20% or more member					
	Name change Add as less than 20% member				Name change Add as less than 20% member					
	Remove member				Remove member					

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that manager (n FOR NEW MANA	ew name and/or a GERS – <b>in a sepa</b>	iddress), then check all <b>rate block,</b> list the nan	g changed, and below that provide boxes that apply to indicate the lie in the NEW Name blank and g attach the <u>Amendment Attachm</u>	change being made ive the address, and	for that manager. I check the
lame currently shown in ACC rec	cords		Name currently shown in ACC reco	rds	
EW Name			NEW Name		
LVV (Valine			MEN MONTE		
ddress 1			Address 1		
ddress 2 (optional)			Address 2 (optional)		
ity	State Provi		City	State or Province	Zip
ountry	[2664]		Country		
Address change	Add as mana	ager	Address change	Add as manage	er
Name change	Remove mai	nager	Name change	Remove manaç	ger
form L04 CHANGIN The filing	0. The filing will IGTO MEMBER- will be rejected	Il be rejected if it is s MANAGED LLC con I if it is submitted wit	mplete and attach the <u>Mana</u> ubmitted without the attachi plete and attach the <u>Membe</u> hout the attachment.  APPOINTED - <u>see Instruct</u>	ment. er Structure Attac	
7.1 REQUIRED -	give the <b>name</b> (	(can be an individual or street address f the NEW statutory	7.2 OPTIONAL - r		
atutory Agent Name (required)					
tention (optional)			Attention (optional)		
Idress 1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Address 1		
	· · · · · · · · · · · · · · · · · · ·				
ldress 2 (optional) ty	State	Zip	Address 2 (optional) City	Ct-t-	Žip
· · · · · · · · · · · · · · · · · · ·			M002 must be submitted al	State ong with these Ar	_ <del></del>
statutory A and/or 8.2:	AGENT ADDRE	SS CHANGE – ADDI	RESS OF CURRENT STATU	FORY AGENT - d	complete 8.1
	<b>i or street add</b> ox) in Arizona of it:		8.2 NEW mailing statutory age	g address in Ariz ent (can be a P.O.	
tention (optional)			Attention (optional)	· · · · · · · · · · · · · · · · · · ·	······································
			I Address 4		
OUTESS 1			Address 1		
ddress 1 ddress 2(optional)			Address 2 (optional)		1

MANAGERS CHANGE (CHANGE IN MANAGERS) - Use one block per person - FOR MANAGERS CURRENTLY SHOWN

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9.	Щ	ARIZONA KNOWN PLACE OF BUSINESS ADDRES	S 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 <b>NEW physical or street address</b> (not a P.O. Box) of the place of business of the LLC in Arizona:								
		place of business of the LLC in Arizona.							
			)						
		Attention (optional)							
		Address 1							
		Address 2 (optional)							
		City	State or Zip Province						
		Country	FIVANCE						
O.		DURATION CHANGE - check one to indicate the NI	W 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 occurren	ce of this <b>event</b> :						
			(describe an event)						
1.	□ ·	ENTITY TYPE CHANGE - if changing entity type, ch Changing to a PROFESSIONAL LLC - number 12							
		Changing to a NON-PROFESSIONAL LLC (profes	sional LLC becoming a regular LLC).						
l <b>2.</b>	<u></u>	PROFESSIONAL SERVICES CHANGE - describe the render:	e <b>NEW</b> type of professional services the professional LLC will						
L3.		OTHER AMENDMENT — if an amendment was made you must attach to these Articles of Amendment a co	that was not addressed by the check boxes on this form, then implete copy of the LLC's written amendment.						
ign	IATU	RE: By checking the box marked "I accept" below together with any attachments is submitted in	I acknowledge under penalty of perjury that this document compliance with Arizona law.						
	1		ACCEPT						
			ACCEPT						
	<u>/</u>	Leo Z							
<i>,</i>	iture JIRE	Printed N  - check only one and fill in the corresponding blant	2000 (1111) 400 233						
Ø	indiv	is a manager-managed LLC and I am signing ridually as a manager or I am signing for an entity nager named:	This is a member-managed LLC and I am signing individually as a member or I am signing for an entity member named:						
	K	86h King Properties LLC							
Filio	a Eoc	e: \$25.00 (regular processing)	Il. Arizana Composition Commission - Comparato Ellings Socio						

Arizona Corporation Commission - Corporate Filings Section Filing Fee: \$25,00 (regular processing) 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.

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### **ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION**

# **COVER SHEET**

#### **USE A SEPARATE COVER SHEET FOR EACH DOCUMENT**

•	WHAT AP	-					
]	New Entity	☑ Change to existing	entity	Re-submission/Cor	rection		
	ENTITY N	IAME:					
	CALCULA	TE YOUR FEES (copies, c	ertificate of g	ood standing and expedited	d processing	are all option	al):
0	cument filir	g fee (fees are listed on the l	bottom of the	form or on the fee sched	dule)	Subtotai:	25.00
		XPEDITED processing?	<b>✓</b> YES		add \$35.00	Subtotal:	35.00
]	Corporation	certified copies \$ 5.00	each x	(enter number of copies	requested)	Subtotal:	
]	LLC certifie	d copies \$10.00	each x	(enter number of copies	requested)	Subtotal:	
Ī	Certificate	of Good Standing \$10.00	each x	(enter number of copies	requested)	Subtotal:	
_							CO 00
Ca	PAYMEN  MOD Accoush - do not material months or months o	ail cash. Cash may be used on ey orders - must be made pay necks must be completely and	yable to "Arize properly filled	on submittals. ona Corporation Commission out, including the amount	on," with all v	IACCEPTABLE	CHECKS
Ca Ch ab inc ha Cr	PAYMEN  MOD Account of the control o	METHOD: unt # ail cash. Cash may be used on	yable to "Arize properly filled address of the check number nittals, and fo only Visa, Ma	on submittals. ona Corporation Commission dout, including the amount e account holder; no imprin rs; temporary checks (new or online corporation annua esterCard, and American Ex	on," with all versions. UN ted or prepri accounts). Il reports, onl opress.	vords spelled IACCEPTABLE nted check no ine name res	out and no E CHECKS umber; ervations, o
Ca Ch ab inc ha Cr	PAYMEN  MOD Account of the control o	mETHOD:  unt # ail cash. Cash may be used on ay orders - must be made pay necks must be completely and nted or preprinted name and a camped names, addresses, or ay be used for in-person subr s of good standing. We accept	yable to "Arize properly filled address of the check number nittals, and fo only Visa, Ma	on submittals. ona Corporation Commission out, including the amount e account holder; no imprin rs; temporary checks (new or online corporation annua esterCard, and American Ex	on," with all versions. UN ted or prepri accounts). Il reports, onl opress.	vords spelled IACCEPTABLE nted check no ine name res	out and no E CHECKS umber; ervations, o
Cabonia	PAYMEN  MOD Account of the control o	method:  unt # ail cash. Cash may be used on ay orders - must be made pay necks must be completely and inted or preprinted name and a amped names, addresses, or ay be used for in-person subr s of good standing. We accept  D - RETURN DELIVERY	yable to "Arize properly filled address of the check number nittals, and fo only Visa, Ma	on submittals. ona Corporation Commission out, including the amount e account holder; no imprin rs; temporary checks (new or online corporation annua esterCard, and American Ex	on," with all versions. UN ted or prepri accounts). Il reports, onl opress.	vords spelled IACCEPTABLE nted check no ine name res	out and no E CHECKS umber; ervations, o
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Cab	PAYMEN  MOD Account of the control o	method:  unt # ail cash. Cash may be used on ay orders - must be made pay ecks must be completely and nted or preprinted name and a camped names, addresses, or may be used for in-person subr s of good standing. We accept  D - RETURN DELIVERY  Email address:  eo@homeow	yable to "Arize properly filled address of the check number nittals, and fo only Visa, Ma	on submittals. ona Corporation Commission out, including the amount e account holder; no imprin rs; temporary checks (new or online corporation annua esterCard, and American Ex	on," with all vit sections. United or prepriaccounts). Il reports, onle press. RLY and se	vords spelled IACCEPTABLE nted check no ine name res	out and no E CHECKS umber; ervations, o
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View current processing times at: <a href="https://www.azcc.gov/Divisions/Corporations/document-processing-times.pdf">www.azcc.gov/Divisions/Corporations/document-processing-times.pdf</a>

FOR ARIZONA CORPORATION COMMISSION USE ONLY

DATE

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