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AZ Corp. Commission

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

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

OF KNOWN PLACE OF BUSINESS ADDRESS OR STATUTORY AGENT

Read the Instructions L020i

	E – no matter what is orm will be rejected if t	_	• ,			must be co	mpleted.
	ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records: SILKWORTH MANOR, LLC						
2. A	A.C.C. FILE NUMBER: L17836304 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. A	RIZONA KNOWN PL	ACE OF B	USINESS	ADDR	ESS:		
b	REQUIRED - list the known place of business address currently shown in A.C.C. records (before any changes);			3.2 Optional - List the NEW known place of business address in Arizona (must be a street or physical address):			
Attention	(optional)				N MULLIGAN		
7505 N 70TH ST Address 1			5701 E CACTUS RD Address 1				
	(optional) ARADISE VALLEY	AZ	85253		2 (optional)	AZ	85254
City PARADISE VALLEY State Zip City SCOTTSDALE State Zip Zip State Zip State Zip ScottsDALE State Zip State Zip ScottsDALE State Zip State Zip ScottsDALE ScottsDALE State Zip ScottsDALE ScottsDAL							
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	4.1 REQUIRED - list the name and physical or street address (not a P.O. Box) in Arizona of the existing statutory agent:			4.2 REQUIRED - list the mailing address (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:			
<u> </u>	FORAKIS LAW FIRM, Agent Name	, PLC					
Attention (optional) 346 E PALM LN Address 1			Attention (optional) 346 E PALM LN Address 1				
	2 (optional) OENIX	AZ State	85004 zip		s 2 (optional) HOENIX	AZ State	85004

the existin agent has	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:						
and follow inst	ructions: ET ADDRES	SS CHANG	ED -	complete number 4.5.		apply	
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 MATLING ADDRESS – give the NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):				
Attention (optional)	Attention (optional)			Attention (optional)			
Address 1			Address 1				
Address 2 (optional)			Address	2 (optional)			
City	State	Zip	City		State	Zip	
	107						
and complete the fo	llowing for	the NEW s	tatutor statut	y agent is being appo ory agent:	inted, chec	k the box	
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):				
HAUF LAW PLC							
Statutory Agent Name MICHAEL GOLDENBERG							
Attention (optional)			Attention	ı (optional)			
4225 W GLENDALE AVE							
Address 1			Address	i			
STE A104 Address 2 (optional)	<u> </u>		Address	2 (optional)			
City PHOENIX	AZ State	85051 z _{lp}	City		Chaha	7:0	
5.3 REQUIRED – if you ar form M002 must be si	e appointin	g a new sta	atutory			zip eptance	

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.

Q1 A	✓ I ACCEPT	
John follow	JOHN MULLIGAN	06/30/2016
Signature	Printed Name	Date
REQUIRED – check only one and	fill in the corresponding blank if sign	ing 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:	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 fili	ng fee. 1300 W. Washingto	n Commission - Corporate Filings Section on St., Phoenix, Arizona 85007
All fees are nonrefundable - see Instructi	ons. 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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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): SILKWORTH MANOR, 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 <i>either</i> an individual or an entity). <i>NOTE</i> - 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:						
	HAUF LAW PLC						
3.	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.						
	·		. *				
MICHAEL GOLDENBERG 06/30/201							
Sign	iature Printed M		06/30/2016 Date				
RE	QUIRED – check only one:						
	Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.	behalf of the entity named a and I am authorized to act f	as statutory agent,				
L	, , , , , , , , , , , , , , , , , , , ,						

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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