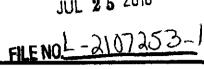
AZ CORPORATION COMMISSION FILED

JUL 2 5 2016





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

Read the Instructions L015i		
1. ENTITY NAME - give the exact name of the LLC as curr HTT Solutions LLC	rently shown in A.C.C. records:	
2. A.C.C. FILE NUMBER: L-2107 253-1	its 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) — <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.		
Name currently shown in ACC records With Car Than You	Name currently shown in ACC records	
NEW Name	NEW Name	
lettes West Copperwood way		
Address 1	Address 1	
Address 2 (optional)	Address 2 (optional)	
Tuscon AZ 85757	City State or Zip	
City State or Zip Province	Province	
Country	Country	
Add as 20% or more member	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	
Name currently shown in ACC records	Name currently shown in ACC records	
	NEW Name	
NEW Name	NEW Name	
Address 1	Address 1	
Address 7 (optional)	Address 2 (optional)	
Address 2 (optional)	, and a copyright of the copyright of th	
City State or Zip Province	City State or Zip Province	
Country	Country	
Address change Add as 20% or more member	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	

IN A.C.C. RECORDS - list the name of each manager being that manager (new name and/or address), then check all) — Use one block per person - FOR MANAGERS CURRENILY SHOWN g changed, and below that provide any new information for boxes that apply to indicate the change being made for that manager.
FOR NEW MANAGERS - in a separate block, list the nam	ne in the NEW Name blank and give the address, and check the attach the <u>Amendment Attachment for Managers</u> form L043.
A -	Account to the property consequence of the property of the pro
PA: Pera	
Name currently shown in ACC records	Name currently shown in ACC records
NEW Alame	NEW Name
Patrick A. Pena	
Ley55. 9th West	Address 1
	Address 2 (optional)
P.O. Box 1044 AZ 85936	
ST JOHNS State or Zip	City State or Zip Province
Country	Country
Address change Add as manager	Address change Add as manager
Name change Remove manager	Name change Remove manager
<u> </u>	J.=
instructions: CHANGING TO MANAGER-MANAGED LLC – co form L040. The filing will be rejected if it is s	plete and attach the Member Structure Attachment form L041.
 7. STATUTORY AGENT CHANGE – NEW AGENT 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:	
	·
Statutory Agent Name (required)	
Attention (optional)	Attention (optional)
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City State Zip	City State Zip
7.3 REQUIRED – the <u>Statutory Agent Acceptance</u> form	M002 must be submitted along with these Articles of
Amendment.	
	· ·
	RESS OF CURRENT STATUTORY AGENT – complete 8.1
and/or 8.2:	
and/or 8.2: 8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing	8.2 NEW mailing address in Arizona of the existing
and/or 8.2: 8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing	8.2 NEW mailing address in Arizona of the existing
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)
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):
and/or 8.2: 8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent: Attention (optional)	8.2 NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box): Attention (optional)

City

9 AH	(IZONA 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?
Γ	Yes - go to number 10 and continue
	No – go to number 9.2 and continue
	you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the known are of business of the LLC in Arizona:
	Attention (optional)
	Address 1
	Address 2 (optional)
	City State or Zip Province
	Country
10. U DUR	RATION CHANGE - check one to indicate the NEW duration or life period of the LLC:
	Perpetual Perpetual
	The LLC's life period will end on this date: (enter a date – mm/dd/yy)
Γ	The LLC's life period will end upon the occurrence of this event :
	(describe an event)
11. TEN	TITY TYPE CHANGE – if changing entity type, check one and follow instructions:
<u>_</u>	Changing to a PROFESSIONAL LLC - number 12 must also be completed.
L	Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).
	OFESSIONAL SERVICES CHANGE — describe the NEW type of professional services the professional LLC will nder:
	HER AMENDMENT — if an amendment was made that was not addressed by the check boxes on this form, then u 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.
100	\sim \sim
1 1/1/2	I ACCEPT
Toki	PM A Kena Some 2-25-201
Signature	Printed Name Date (mm/dd/yy)
REQUIRED -	- check only one and fill in the corresponding blank if signing for an entity:
individu	a manager-managed LLC and I am signing lally as a manager or I am signing for an entity ler named: This is a member-managed LLC and I am signing individually as a member or I am signing for an entity member named:
	\$25.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section
	rocessing – add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007 nonrefundable – see Instructions. Fax: 602-542-4100
Name to a distant	Hotel C.C. forms reflect only the minimum provisions required by statute. You should seek grivate legal counsel for those matters that may pertain

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private 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.