AZ Corp. Commission
05572058

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JUN 24 2016
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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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:
WHITE MOUNTAIN TRUCKING LLC

2. **A.C.C. FILE NUMBER:** L-1797782-7
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. 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):			**3.2** *Optional* - List the NEW known place of business address in Arizona (must be a street or physical address):		
Attention (optional)			Attention (optional)		
11407 S 37TH AVE			3250 S. 35TH AVE		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City LAVEEN	AZ State	85339 Zip	City PHOENIX	AZ State	85009 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:			**4.2** *REQUIRED* – list the **mailing address** (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:		
STEVE BYRDY RAY					
Statutory Agent Name					
Attention (optional)			Attention (optional)		
11407 S 37TH AVE			PO BOX 980		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City LAVEEN	AZ State	85339 Zip	City CAMP VERDE	AZ State	86322 Zip

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)		
3250 S 35TH AVE Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
PHOENIX City	AZ State	85009 Zip	City	State	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					
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	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

Signature	Printed Name	Date
Lori Knight	LORI KNIGHT	06/14/16

REQUIRED – check only one and fill in the corresponding blank if signing 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:** STEVE BYRDY RAY	☐ 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.

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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:

WHITE MOUNTAIN TRUCKING 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?	☐ YES	☑ NO	If YES, add $35.00 Subtotal:	
☐ Corporation certified copies	$ 5.00 each x	(enter number of copies requested)	Subtotal:	
☐ LLC certified copies	$10.00 each x	(enter number of copies requested)	Subtotal:	
☐ Certificate of Good Standing	$10.00 each x	(enter number of copies requested)	Subtotal:	
TOTAL YOUR AMOUNT OWED			**TOTAL AMOUNT DUE:**	$5.00

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):

☐ Email	Email address:		
☐ Pick up	Name:		Phone:
☑ Mail	Name: WHITE MOUNTAIN TRUCKING LLC		
	Address: 3250 S. 35TH AVE		
	City: PHOENIX	State: AZ	Zip: 85009
	Phone: 1-602-237-9440		

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