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ARIZO: CAMISSION CORPURA CO DIVISION

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

## LLC STATEMENT OF CHANGE OF KNOWN PLACE OF BUSINESS ADDRESS OR STATUTORY AGENT

Read the Instructions <u>L020i</u>

**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.	<b>ENITIV</b> NAME – give the exact name of the LLC as currently shown in A.C.C. records:
	OSO GRANDE INVESTMENTS, L.L.C.
2.	A.C.C. FILE NUMBER: L10791208
	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	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):			
Attenti	on (optional)			Attention (optional)			
3904 S. Alder Drive							
Address 1			Address 1				
	s 2 (optional)	AZ	85282	Address	2 (optional)		
City	l'empe	State	Zip	City		State	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			4.2 REQUIRED - list the mailing address			
or street address (not a P.O. Box) in			(if one exists in A.C.C. records) in Arizona			
Arizona of the ex	kisting statuto	ory agent:	of the existing Statutory Agent:			
			<u> </u>			
James R. Hienton			1			
Statutory Agent Name			1			
			1			
Attention (optional)	·	<del></del>	Attention (optional)			
Automati (optional)			Acceleration (Optionary			
201 N. Central Avenue, # 3300						
Address 1			Address 1			
			1			
			1			
Address 2 (optional)	1.0		Address 2 (optional)		1	
	AZ	85004				
Phoenix						
City Hooth	State	Zip	City	State	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:					
<ul> <li>✓ STREET ADDRESS CHANGED – complete number 4.5.</li> <li>✓ MAILING ADDRESS CHANGED – complete number 4.6.</li> </ul>						
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):			
James R. Hienton			James R. Hienton			
Attention (optional) 5045 N. 12th Street, Suite 11		Attention (optional) 5045 N. 12th Street, Suite 110				
Address 1			Address 1			
Address 2 (optional)  Phoenix	AZ	85014	Address 2 (optional) Phoenix	AZ	85014	
City	State	Zip	City 1 HOURIN	State	Zip	
5. NEW STATUTORY and complete the form			tatutory agent is being ap	pointed, chec	ck 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):			
Statutory Agent Name						
Attention (optional)			Attention (optional)			
Address 1			Address 1		<u></u>	
Address 2 (optional)			Address 2 (optional)			
City	State	Zip	City	State	Zip	
<b>5.3</b> REQUIRED – If you an form M002 must be so	e appointin ubmitted al	g a new sta ong with th	atutory agent, the <u>Statuto</u> ils Statement of Change f	ory Agent Acc	<u>eptance</u>	

## 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						
James Hierton	James R. Hienton	6/27/2016				
Signature	Printed Name	Date				
REQUIRED – check only one and  I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named:	fill in the corresponding blank if sign  I am a <b>Member</b> of this member- managed LLC or I am signing for an entity member named:	ing for an entity:  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 filin All fees are nonrefundable – see Instruction	g fee. 1300 W. Washingto	i Commission - Corporate Filings Section in St., Phoenix, Arizona 85007				

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.