# 'AZ CORPORATION COMMISSION FILED

AZ Corp. Commission
05591568

JUL 2 9 2016

# FILE NO. 1948/469

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

#### ARTICLES OF AMENDMENT

			Read the	Instr	uction	s <u>L015i</u>	41		
1. ENTITY NAM	E – give the e	xact name of	the LLC as cu	irrentiy	shown	in A.C.C.	records:		
			RD LOOP,						
2. A.C.C. FILE N	UMBER:	L	19481469			<del> </del>			
Find the A.C.C. f	ile number on ti	ne upper corner	of filed docume	ents OR	on our	website at: <u>I</u>	nttp://www.a	zcc.gov/Divisio	ns/Corporations
CHECK THE BO	X NEXT T	O EACH CH	IANGF RE	TNG I	MADE	AND			
COMPLETE THE						1			
3. ENTITY	NAME CHAN	SE – type or p	rint the exac	: NEW	name d	the ILC I	n the space	below:	
		<u></u>							
4. W MEMBER	S CHANGE (	CHANGE IN N	(EMBERS) -	see In	structic	ns L015!	Use one ble	ock per perso	n - FOR MEMBERS
information	for that memb	er (new name a	nd/or addmass)	n comin	nennoer	neing chang	geo, and belo	w that provide	элу пеж
the approp	tate box. If mo	re space is need	separate bloc ded, complete :	k, list ti and atta	ie name ch the <u>A</u>	in the NEW mendment	Name blank Attachment fo	and give the a	being made for ddress, and check m L044.
į	RAH FOX						······································		-
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Address 2 (optional)		AZ		Addres	s 2 (opti	onal)			
SHOW LOW	m	State or	85901 Zlp	City	SHO	W LOW		AZ State or	85901
UNITED S	TATES	Province				ITED ST	ATES 🕶	Province	Zip
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Name change		less than 209			Name (	-		is 20% or mo	ore member 10% member
	Remov	e member					<del></del>	ve member	.0% member
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	Dilline GGA. It is	Wie space i	s needed, complete	and attach the An	endment Attachme	ent for M	lanagers fo	erm L043.	
Name currently show	en in ACC menute								
, indicate carreinly asiny	III III ACC IECUIS			Name curren	tly shown in ACC reco	rds			
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FMGIGBS I				Address 1					
Address 2 (optional)				Address 2 (or	rtional)			<del></del>	
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_ (==									<del></del>
6. MAN	<b>AGEMENT STR</b> ctions:	RUCTURE	CHANGE - see ]	nstructions LO1:	🖅 – check only o	ne box	below an	d follow	
		MANAGER	-MANAGED LLC -	complete and s	ttach the Manae	ar Ctm.	abuua Abba		
	onn Lugu. In	e ming wii	i de rejectea if it i	s submitted witi	hout the attachm	ient.			
	CHANGING TO	MEMBER-	MANAGED LLC - c if it is submitted i	omplete and at	ach the <u>Member</u>	Struct	ure Attac	<u>nment</u> form	L041.
•	ne ming win b	e rejecten	n it is submitted	without the atta	cnment.				
7. STATE	ITORY AGENT	T CHANGE	- NEW AGEN	IT ADDOTHE					<del>-</del>
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or an	entity) <b>and p</b> a	hysicai o	can be an individu r street address	1	OPTIONAL - m NEW Statutory	ailing a Agent	ddress in (can be a	Arizona of P.O. Box)	
(not a ageni	a P.O. Box) in ,	Arizona of	the NEW statutor	У	,	,	(		
			·						
Statutory Agent Name	Zan ari dani d								
ommon y Agent Hanne	(required)			{					
Attention (optional)	·			Attention (op	tonal)		· · · · · · ·	<del></del>	<del></del>
Address 1	*· <del>*</del> .				<u></u>				
MULICIPS I				Address 1					
Address 2 (optional)	·	<del>T : : : : : : : : : : : : : : : : : : :</del>	T	Address 2 (op	tional)		·	<del></del>	
City		State	Zip	City			State	Zip	
7.3 REQUI	RED - the Sta	tutory Age	nt Acceptance for	m M002 must b	e submitted alor	g with	these Art	icles of	
Amen	iment.								
B. STATU	TORY ACENT	ADDREC	C 61111000						
and/or	8.2:	MDDKES	S CHANGE - ADI	DRESS OF CUR	KENT STATUTO	DRY AG	ENT - co	omplete 8.1	
8.1 NEW /	physical or st	reet addr	ess	8.2	NEW mailing	addres	s in Arizo	na of the e	xistina
	P. O. Box) in A ory agent:	rizona of	the existing		statutory agent	(can b	e a P.O.	Box):	
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Monton (anticum)									
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ddress 2(optional)				Address 2 (op	ional)	<u> </u>		-	
Ity '		State	Zip	City	!	4	State	710	1

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9. ARIZONA KNOWN PLACE OF BUSINI			
9.1 Is the NEW Arizona known place of busi	ness address the sam	le as the street add	
Yes - go to number 10 and contin	tue	the street address or the stat	utory agent?
No - go to number 9.2 and conti	nue		
9.2 If you answered "No" to number 9.1, give place of business of the LLC in Arizona:	e the NEW physical	or street address (not a P.O. Bo	x) of the known
Attention (optional)	<del></del>		
Address 1	_		
Notified 1			
Address 2 (optional)	· <del></del>		
UNITED STATES	[ <del>-</del> ]	State or Zip	
Country		Province	1
10. DURATION CHANGE - check one to ind  Perpetual  The LLC's life period will end on this			<i>a</i> v)
The LLC's life period will end upon the	e occurrence of this	event:	177
			loosiths as assess
_			lescribe an event)
11. ENTITY TYPE CHANGE - If changing ent	ity type, check one a	nd follow instructions:	
Changing to a PROFESSIONAL LLC -			
Changing to a NON-PROFESSIONAL I	LC (professional LLC	hecoming a regular (1.6)	
_	()	decoming a regular EEC).	
12. PROFESSIONAL SERVICES CHANGE - render:	describe the <b>NEW</b> typ	pe of professional services the prof	essional LLC will
13. OTHER AMENDMENT — if an amendment you must attach to these Articles of Amend	was made that was i dment a complete co	not addressed by the check boxes by of the LLC's written amendment	on this form, then
SIGNATURE: By checking the box marked "I acce together with any attachments is su	ept" below, I acknowl ibmitted in compilanc	edge <i>under penalty of perjury</i> that st with Arizona law,	this document
^	✓ I ACCEPT		
<b>54</b> ()	<del></del>		
Signature	SLRAH	Tex	07/18/16
REQUIRED - check only one and fill in the correspon	rrinted Name ding blank if elaning	for an entity	Date (mm/dd/yy)
This is a manager-managed LLC and I am sig	ning This		
individually as a manager or I am signing for a manager named:	n <b>entity</b> 🔀 indiv	is a member-managed LLC and idually as a member or I am sign ber named:	I am signing ling for an <b>entity</b>
		SUL	
	<del></del>		
Filing Fee: \$25.00 (regular processing)	Mail: Arizon	a Corporation Committee	Mark.
Expedited processing - add \$35,00 to filing fee.		a Corporation Commission - Corpo W. Washington St., Phoenix, Arizo	orate Filings Section na 85007
All fees are nonrefundable - see Instructions.			
Please be advised that A.C.C. forms reflect only the minimum provision to the individual needs of your business.  All documents filed with the Arizona Compression Commission and the commission of the commission	s required by statute. You s	hourd seek private legal counsel for those ma	tters that may pertain
All documents filed with the Arizona Corporation Commission are public if you have duestions after reading the Instructions, please call 602-542	record and are open for pu -3026 or (within Arizona on	Dic Inspection. y) 800-345-5819.	

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JUL 2 9 2016

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

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### ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

## **COVER SHEET**

### USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

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1. WHAT A	RE YOU FILING?					1	
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3. CALCUL	ATE YOUR FEES (c	opies, certifica	ate of goo	d standing a	nd expedited processing a	are all option	nal):
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Do you want	EXPEDITED process	sing?	YES	NO	If YES, add \$35.00	Subtotal:	
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