AZ CORPORATION COMMISSION FII FD

AZ Corp. Commission

DEC 1 4 2016

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE ONLY. ARTICLES OF AMENDMENT Read the Instructions L015i ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records: A.C.C. FILE NUMBER: 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 CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE. ENTITY NAME CHANGE - type or print the exact NEW name of the LLC in the space below: MEMBERS CHANGE (CHANGE IN MEMBERS) - see Instructions L015i - 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 Amendment Attachment for Members form LO44. Dallas Bates Name currently shown in ACC records Name currently shown in ACC records **NEW Name**

10431 E KIVA	Ave					
Address 1		Address 1				
Address 2 (optional) MC SA	AZ 85209	Address 2 (optional)				
City	State or Zip Province	City State or Zip Province				
Country		Country				
Address change Add	d as 20% or more member	Address change				
	d as less than 20% member	Name change Add as less than 20% member				
⊠ ^ Rer	nove member	Remove member				
Name currently shown in ACC records NEW Name		Name currently shown in ACC records NEW Name				
Address 1		Address 1				
Address 2 (optional)		Address 2 (optional)				
City	State or Zip Province	City State or Zip Province				
Country		Country				
Address change Add	l as 20% or more member	Address change				
Name change Add	l as less than 20% member	Name change Add as less than 20% member				
Rer	nove member	Remove member				

NEW Name

Remove member

5.	MANAGERS CHANG IN A.C.C. RECORDS - ils that manager (new nam FOR NEW MANAGERS - appropriate box. If mo	t the name e and/or ac in a separ .	of each manager be idress), then check ate block, list the n	eing chan all boxes name in th	iged, and below that pro that apply to indicate th he NEW Name blank and	vide any ne ne change b I give the ac	w informati eing made i idress, and	on for for that manager. check the
				1				
Name currently shown in ACC records			Nam	ne currently shown in ACC re	ecords			
NEW Name	•			NEW	/ Name			
Address 1				Addr	ress 1			
					-			
Address 2	(optional)			Addr	ress 2 (optional)			
City		— State o		City			State or Province	Zip
Country	,			Cour	ntry			
Add	dress change 🔲 Add	as mana	ger		Address change	Add a	s manage	r
☐ Nai	me change 🔲 Ren	ove man	ager		Name change	Remo	ve manag	er
CHANGING TO MANAGER-MANAGED LLC – complete and attach the Manager Structure Attachment form L040. The filing will be rejected if it is submitted without the attachment. CHANGING TO MEMBER-MANAGED LLC – complete and attach the Member Structure Attachment form L04 The filing will be rejected if it is submitted without the attachment. 7. STATUTORY AGENT CHANGE – NEW AGENT APPOINTED – see Instructions L015i: 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)					nment form L041. Arizona of			
Address 1				Add	dress I			
Address 2 (ontinual)	I			dress 2 (optional)		1 ·····	
City	wpsier(m)	State	Zip	City			Centa	Zip
7.3	REQUIRED - the Stat Amendment.	<u> </u>			·	along with	State these Art	
8. 🗌	STATUTORY AGENT and/or 8.2:	ADDRES	S CHANGE - AD	DRESS	OF CURRENT STAT	UTORY A	GENT - co	omplete 8.1
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 (c	optional)	·		Atte	ention (optional)			
Address 1		Add	Address 1					
Address 2(d	optional)		T	Add	dress 2 (optional)		1	T
City		State	Zip	City	, , ,		State	Zip

		_
		-

9. _ /	ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:
9.1 I	is the NEW Arizona known place of business address the same as the street address of the statutory agent?
	Yes - go to number 10 and continue
	No - go to number 9.2 and continue
9.2 I	If you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:
	Attention (optional)
	Legalitas (Abstasta)
	Address 1
	Address 2 (optional)
	City State or Zip
	Province
	Country
10. 🗆 DU	IDATION CHANCE - shoeld man be indicate the surface decades a 100 - 100 - 100 - 100
10. DO	JRATION CHANGE - check one to indicate the NEW duration or life period of the LLC:
	Perpetual
	The LLC's life period will end on this date :(enter a date - mm/dd/yy)
	The LLC's life period will end upon the occurrence of this event:
	(describe an event)
	(describe an event)
11. 🗍 EF	NTITY TYPE CHANGE - If changing entity type, check one and follow instructions:
	Changing to a PROFESSIONAL LLC - number 12 must also be completed.
	Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).
_	
12. 🗌 PF	ROFESSIONAL SERVICES CHANGE - describe the NEW type of professional services the professional LLC will
r	ender:
13. 🗍 01	THED AMENDMENT — if an amondment was made that we are addressed by the about house and the formal transfer.
73. U 0	THER AMENDMENT — if an amendment was made that was not addressed by the check boxes on this form, then you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.
,	The state of the s
SIGNATUR	E: 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.
0	, I ACCEPT
T/A	$f \sim g \sim 1.011$
	muly Bates 12/10/16
Signature	Printed Name Date (mm/dd/yy)
	- check only one and fill in the corresponding blank if signing for an entity:
	s a manager-managed LLC and I am signing dually as a manager or I am signing for an entity This is a member-managed LLC and I am signing individually as a member or I am signing for an entity
	dually as a manager or I am signing for an entity individually as a member or I am signing for an entity member named:
	Emily Bates
	\$25.00 (regular processing) Mall: Arizona Corporation Commission - Corporate Filings Section
	processing – add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
	TON, OVE 342-4100

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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DEC 1 4 2016

ARIZONA CORP. COMMISSION

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ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT ** ORDER COPIES USING A RECORDS REQUEST FORM **

WHAT ARE Y	YOU FILING? ty Change to existing entity Re-submission of	of rejected filing
MEAN THREA	y Change to existing entity The submission of	rejected ming
ENTITY NAM	ME - give the exact name of the corporation as currently	shown in A.C.C. records:
-	Queen B Home LLC	
-	PROCESSING?	
	1 \$35 to the filing fee NO - pay only the	
	ling fees are listed on the bottom of each form or on the pazcc.gov, under the FAQs.	fee schedule on our website,
PAYMENT:	- I I I I I I I I I I I I I I I I I I I	
MOD Acco	count #: Total amount to deduct: mail cash. Cash may be used only for in-person submittals.	
include: no impr handwritten or s Credit cards - online certificate	Checks must be completely and properly filled out, including the amount printed or preprinted name and address of the account holder; no import stamped names, addresses, or check numbers; temporary checks (ne - may be used for in-person submittals, and for online corporation annates of good standing. We accept only Visa, MasterCard, and American - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY)	orinted or preprinted check number; ew accounts). nual reports, online name reservations, or Express.
★ Email	Email address: emily icross @ gmail.com	
Pick up		Phone:
☐ Mail	Name:	
	Address:	
	City: State;	Zip:
	Phone:	
DOCUMENTS	WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MA	ANNER (APPROXIMATELY ONE WEEK)
	FOR ARIZONA CORPORATION COMMISSION US	SE ONLY
PICK-UP B	BY:	DATE:

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