AZ CORPORATION COMMISSION FILED

DEC 1 9 2016



FILE NO. L19483067

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE ONLY.

| | | | | | | | MENDMEN ctions <u>L015i</u> | T | | | |
|---|---|---|---|--|---|-----------------------------------|--|--|---|--|--|
| 1. | ENTITY NAME – give the exact name of the LLC as curre | | | | | | rently shown in A.C.C. records: | | | | |
| | BAKKEN BANDITS TRANSPORT, LLC | | | | | | | | | | |
| 2. | A.C. | A.C.C. FILE NUMBER: L19483067 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 | | | | | | | s/Corporations | | |
| | ECK | THE BOX | NEXT TO | EACH CH | ANGE BEI | NG M | IADE AND THAT CHANGI | | | | |
| 3. | V | | | | rint the exact | NEW r | ame of the LLC in | the space l | below: | | |
| | | Lifestyles . | Assisted L | iving, LLC | | | | | | | |
| 4. | | CURRENTLY S information fo that member. | HOWN IN A.C r that membe FOR NEW ME | .C. RECORDS - r (new name ar MBERS - in a : | list the name or id/or address), separate block | f each r then ch c, list th | structions L015i – et all boxes that ap e name in the NEW I th the <u>Amendment A</u> | ed, and belov oply to indical Name blank a | w that provide te the change and give the a | any new being made for ddress, and check | |
| Name | e curre | ntly shown in ACC | records | | | Name | currently shown in ACC | records | | | |
| NEW Name | | | | NEW Name | | | | | | | |
| Addre | ess 1 | | | | | Addre | ss 1 | | | | |
| Addre | ess 2 (c | optional) | <u></u> | <u></u> | | Addre | ss 2 (optional) | | | | |
| City | | | | State or Province | Zıp | City | | | State or Province | Zip | |
| Coun | • | -Acc change | C Add as | 200/ | | Count | | | - 2004 | | |
| Address change Add as 20% or more member Name change Add as less than 20% member | | | | | Add as 20% or more member Name change | | | | | | |
| | 14611 | ic change | = | e member | 70 IIIE/IIDE | | warne change | Ξ | ove member | 20 % mentber | |
| Name currently shown in ACC records | | | | | Name currently shown in ACC records | | | | | | |
| NEW | Name | | | | | NEW | Yarne | | | | |
| Addre | ess 1 | | | | | Addre | ss 1 | | | | |
| Addre | ess 2 (4 | optional) | | : | | Addre | ss 2 (optional) | | | | |
| City | | | | State or Province | Zip | City | | · · · · · · · · · · · · | State or Province | Zip | |
| Coun | try | ļ | - | | | Count | ry | | | | |
| | Addı | ess change | Add as | 20% or more | e member | | Address change | Add a | as 20% or m | ore member | |
| | Nam | ie change | = | less than 209 | % member | | Name change | | as less than . | 20% member | |

| J. | | IN A.C.C. RECORDS - list that manager (new name FOR NEW MANAGERS - i | the name and/or ad name | of each manager being dress), then check all b ate block, list the name | chan oxes e in ti | ie one block per person - I ged, and below that provide that apply to indicate the ch he NEW Name blank and give the <u>Amendment Attachmen</u> | any nev ange be e the ad | w information in the second of | on for or that manager, check the | |
|-------------------------------------|---|--|---------------------------------------|---|---|---|--------------------------------|--|---|--|
| | | | | | | | | | | |
| Name currently shown in ACC records | | | | | | Name currently shown in ACC records | | | | |
| NEW | Name | | | | - NEW | Name | | | | |
| Addr | ress 1 | | | | Add | ress 1 | | | | |
| Addr | ess 2 (c | optional) | | . | Add | ress 2 (optional) | - · : | | <u> </u> | |
| City | [| | State of Province | | City | | <u></u> | State or Province | Zip | |
| Cour | Addı | | as manag | | Con | Address change | Add a | s manager | | |
| | Nam | ne change Rem | nove mana | ager | | Name change | Remo | ve manage | ≌r | |
| 7. | 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 7.2 OPTIONAL – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box): | | | | | | | | Arizona of | |
| | itory Ag | agent: ent Name (required) | _ | | Att | ention (optional) | · | | | |
| , | | | | | | | | | | |
| Addre | ess 1 | | | | Ad | dress 1 | | | | |
| Addre City | ess 2 (o | ptional) | State | Zip | Ad- Cit | dress 2 (optional) | · | State | Zip | |
| | 7.3 | REQUIRED – the Stat Amendment. | utory Age | <u> </u> | | 2 must be submitted alon | ng with | | | |
| 8. | | STATUTORY AGENT and/or 8.2: | ADDRES | S CHANGE - ADDR | ESS | OF CURRENT STATUTO | DRY 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 (optional) | | | | | Attention (optional) | | | | | |
| Addr | ess i | | | | Ad | dress 1 | | | | |
| | ess 2(or | ptional) | Ebabá | 7in | | dress 2 (optional) | | Chaha | 7:- | |
| City State Zip | | | | CH | ү | | State | Zip | | |

| 9. [√] | ARIZONA 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? | | | | | | | | | | |
| | Yes + go to number 10 and continue | | | | | | | | | | |
| | ✓ No - go to number 9.2 and continue | | | | | | | | | | |
| 9,2 | 9.2 If you answered "No" to number 9.1, give the NEW physical or street address (not a P.O. Box) of the knowledge of business of the LLC in Arizona: | | | | | | | | | | |
| | | | | | | | | | | | |
| | Attention (optional) | | | | | | | | | | |
| | 4385 E. Wild Elk Trail | | | | | | | | | | |
| | Address 1 | | | | | | | | | | |
| | THE STATE OF THE S | | | | | | | | | | |
| | Address 2 (optional) Flagstaff | AZ | 86004 | | | | | | | | |
| | Oby | State or | Zip | | | | | | | | |
| | Country UNITED STATES | Province | | | | | | | | | |
| | | | | | | | | | | | |
| 10. 🔲 | DURATION CHANGE - check one to indicate the NEV | W duration or life p | eriod 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 | | , , | | | | | | | | |
| | | | (describe an event) | | | | | | | | |
| | | | (describe all event) | | | | | | | | |
| 11. | ENTITY TYPE CHANGE - if changing entity type, che | eck one and follow i | instructions: | | | | | | | | |
| 🗀 | | | | | | | | | | | |
| | Changing to a PROFESSIONAL LLC – number 12 i | · | | | | | | | | | |
| | Changing to a NON-PROFESSIONAL LLC (professi | ional LLC becomin <u>c</u> | g a regular LLC). | | | | | | | | |
| 12. | PROFESSIONAL SERVICES CHANGE – describe the render: | NEW type of profe | essional services the professional LLC will | | | | | | | | |
| | | | | | | | | | | | |
| 40 | OTHER MENDAPHE STATEMENT OF THE STATEMEN | | | | | | | | | | |
| 13. | OTHER AMENDMENT — if an amendment was made to you must attach to these Articles of Amendment a con | | | | | | | | | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | | | |
| | | | | | | | | | | | |
| SIGNAT | URE: By checking the box marked "I accept" below, I together with any attachments is submitted in | I acknowledge <i>und</i> compliance with Ar | er penaity of perjury that this document izona law. | | | | | | | | |
| | Dwight Printed Nar | ACCEPT | | | | | | | | | |
| -1/ | With the state of | | | | | | | | | | |
| - YN | Dwight | • | 12/13/2016 | | | | | | | | |
| | Printed Nar ED — check only one and fill in the corresponding blank i | = | Date (mm/dd/yy) | | | | | | | | |
| | | | | | | | | | | | |
| | is is a manager-managed LLC and I am signing lividually as a manager or I am signing for an entity | | nber-managed LLC and I am signing s a member or I am signing for an entity | | | | | | | | |
| ma | nager named: | member na | med: | | | | | | | | |
| | | | | | | | | | | | |
| | | - | | | | | | | | | |
| Filino Fe | ee: \$25.00 (regular processing) Mail | : Arizona Corno | ration Commission - Corporate Filings Section | | | | | | | | |
| Expedite | ed processing - add \$35.00 to filing fee. | 1300 W. Wash | ington St., Phoenix, Arizona 85007 | | | | | | | | |
| All fees | are nonrefundable - see Instructions. Fax: | 602-542-4100 | | | | | | | | | |

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.