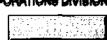
ARIZONA CORP. COMMISSION CORPORATIONS DIVISION



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DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACCUSE 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.

ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:

Swan/Skyline P	laza, LLC						
2. A.C.C. FILE NU Find the A.C.C. file nu			nts OR o	n our website at: htt	p://www.azcc.gov/Oivis	ons/Corporations	
3. ARIZONA KNO	DWN PLACE OF	BUSINESS	ADDR	ESS:	-		
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):				
6262 N Swan Rd. Su	ite 120		Albe	rt Moussa			
Attention (optional)			Attenti	on (optional)		<u> </u>	
Tucson, AZ 85718		6419 N Miramist Way					
Address 1			Addres	; 1,		·	
Address 2 (optional)	AZ	85718	Addres	s 2 (optional)	AZ	85750	
city Tueson	State	Zip	City	Tucson	State	 Z ip	

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):

the street address of the statutory agent?

3.3 If you completed 3.2, is the NEW known place of business address in Arizona the same as

₩No

4.1	REQUIRED – list the r or street address (i Arizona of the existing	not a P.O.	Box) in	4.2 REQUIRED – list the mailing address (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:				
	t J St Clair							
215 N Court Ave 2nd Floor Address 1			Attention (optional) 215 N Court Ave 2nd Address 1	l Floor				
Address .	? (optional) CSOII	AZ State	85701	Address 2 (optional) City Tucson	AZ State	85701		

4.3	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	and follow insti	ructions: ET ADDRE	SS CHANG	iED -	ENT ADDRESS – chec complete number 4.5. – complete number 4.6		apply
phys	STREET ADDRI	ress (not a	P.O. Box)	4.6	NEW MAILING ADD mailing address in Ar statutory agent (can	izona of th	e existing
Attention (option	al)			Attentio	on (optional)		
Address i				Address	s 1		
Address 2 (option	nal)			Address	s 2 (optional)		
City		State	Zip	City		State	Zip
an 5.1 REQU indivi	EW STATUTORY d complete the form IIRED – give the idual or an entity) t address (not a le NEW statutory a	ollowing fon name (car and phys P.O. Box) i	r the NEW : i be an ical or	statut	ry agent is being appo t ory agent: OPTIONAL – mailing a NEW Statutory Agent	address in	Arizona of
Statutory Agent N	lame						
Attention (options	il)			Attentio	n (optional)		
Address 1		_		Address	1		
Address 2 (option	al)		1	Address	2 (optional)		
City		State	Zip	City		State	Zip
_			_		y agent, the <u>Statutory</u> stement of Change for	_	<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

for James Congrated REQUIRED - check only one and	Andrew Caw truy of Had Garnet Can fill in the corresponding blank if sign	•
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:	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		n Commission - Corporate Filings Section on St., Phoenix, Arizona 85007

Fax: 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.

602-542-4100

All fees are nonrefundable - see Instructions.

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.

JAN 17 2017



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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 YOU FILING? New Entity Change to existing entity Re-submission of rejected filing	
Swan / 5Ky/ine Plaza, LLC	
EXPEDITED PROCESSING?	
☐YES - add \$35 to the filing fee ☐NO - pay only the filing fee	
Document filing fees are listed on the bottom of each form or on the fee schedule on our website, http://ecorp.azcc.gov, under the FAQs.	
PAYMENT: MOD Account #: Total amount to deduct:	
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 abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECK 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 reservation 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: andy & andy courtney, com	
Pick up Name:	
Mail Name:	
Address:	
City: State: Zip:	
Phone:	
DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE W	

FOR ARIZONA CORPORATION COMMISSION USE ONLY						
PICK-UP BY:	· · · · · · · · · · · · · · · · · · ·	DATE:	· ·			

View current processing times at: www.azco.gov/Divisions/Corporations/document-processing-times.pdf