R	E	C	Ē	۱	۷	E	D
---	---	---	---	---	---	---	---

APR 1 0 2017



ARIZONA CORP. COMMISSION CORPORATIONS 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 L020i

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

Natural Action Consulting LLC

2. A.C.C. FILE NUMBER: L19397238

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 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):			
Clayton Nolte			Clayton Nolte	· .		
Attention (optional) 475 W. Mesa Lane			Attention (optional) 1510 S. Koch Ranch Road			
Address 1			Address 1			
Address 2 (optional)	AZ	86322	Address 2 (optional)	AZ	86325	
city Camp Verde	State	Zip	_{city} Cornville	State	Zip	
3.3 If you complete the street address			place of business addr	ess in Arizona	the same as	

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 or street address (not a P.O. Box) in Arizona of the existing statutory agent:			4.2 REQUIRED - list the mailing address (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:			
Clayton Nolte Statutory Agent Name						
			Clayton Nolte			
Attention (optional)			Attention (optional)			
475 W. Mesa Lane			475 W. Mesa Lane			
Address 1			Address 1			
Address 2 (optional)	AZ	86322	Address 2 (optional)	AZ	86322	
City Camp Verde	State	Zip	City Camp Verde	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:
 - **STREET ADDRESS CHANGED –** complete number 4.5.
 - MAILING ADDRESS CHANGED complete number 4.6.

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):			
Clayton Nolte Attention (optional) 1510 S. Koch Ranch Road Address 1			Clayton Nolte Attention (optional) 1510 S. Koch Ranch I Address 1	Road		
Address 2 (optional) Cornville	AZ State	86325 _{Zlp}	Address 2 (optional) Cornville	AZ State	86325 _{zip}	

and complete the following for the NEW	
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
Address 2 (optional)	Address 2 (optional)
City State Zip 5.3 REQUIRED – if you are appointing a new st form M002 must be submitted along with the submitted along withe submitted	atutory agent, the <u>Statutory Agent Acceptance</u> nis Statement of Change form.

SIGNATURE – <u>see Instructions L020i</u> 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.

	$\sim \sim 10$	I ACCEPT	
Signature	M. Jula	Clayton Nolte	04/04/2017
Signature		Printed Name	Date

REQUIRED – check only one and fill in the corresponding blank if signing for an entity:

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)	Mail:	Arizona Corporation Commission - Corporate Filings Section
Expedited processing – add \$35.00 to filing fee.		1300 W. Washington 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 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.