AZ CORPORATION COMMISSION FILED

AUG 1 8 2017 FILE NO. 1-18593886



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

		Read the Instructions <u>L015i</u>					
1.	ENT	ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:					
	CAREFREE HOMEOWNER MANAGEMENT COMPANY LLC						
2.	A.C.	.C. FILE NUMBER: L18593886 the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations					
		THE BOX NEXT TO EACH CHANGE BEING MADE AND ETE THE REQUESTED INFORMATION FOR THAT CHANGE.					
3.		ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:					
4.	<b>V</b>	MEMBERS CHANGE (CHANGE IN MEMBERS) – <u>see Instructions L015i</u> – <b>Use one block per person</b> - To REMOVE a member - list the name only of the member being removed and check "Remove member." To ADD a member - list the name and address of the member being added and check "Add member." To CHANGE ADDRESS only - list the name and NEW address and check "Address change." To CHANGE NAME of existing member - list the current name, then the NEW name, and check "Name change."					

			e Amendment Attachment for Membe			
ROBERT F PATTON						
Name currently shown in ACC records			Name currently shown in ACC records ROBERT FRANCIS PATTON TRUSTEE NEW Name OF THE ROBERT FRANCIS PATTON TRUST Address 1			
NEW Name						
PO BOX 6107						
Address 1						
			PO BOX 6107			
Address 2 (optional)			Address 2 (optional)			
CAREFREE	AZ	85377	CAREFREE	AZ	85377	
UNITED STATES	State or Province	Zip	UNITED STATES	State or Province	Zip	
Country			Country			
Address change Add n	nember		☐ Address change ☐ Add member ☐ Name change ☐ Remove member			
☐ Name change ☑ Remo	ve member					
		<del></del>				
Name currently shown in ACC records			Name currently shown in ACC records			
Name currently shown in ACC records			Name currently shown in ACC records			
Name currently shown in ACC records  NEW Name			Name currently shown in ACC records  NEW Name			
NEW Name			NEW Name			
NEW Name			NEW Name			
NEW Name Address 1			NEW Name  Address 1			
NEW Name Address 1	State or	Zíp	NEW Name  Address 1	State or	Zip	
NEW Name  Address 1  Address 2 (optional)	State or Province	Zip	Address 1  Address 2 (optional)	State or Province	Zip	
NEW Name  Address 1  Address 2 (optional)		Zip	Address 1  Address 2 (optional)		Zip	
NEW Name  Address 1  Address 2 (optional)  City  Country	Province	Zip	Address 1  Address 2 (optional)  City  Country	Province	Zip	
NEW Name  Address 1  Address 2 (optional)  City  Country		Zip	Address 1  Address 2 (optional)  City  Country		Zip	

n LO41.			
:			
Attention (optional)			
1			
existing			
-			

). <u> </u>	ARI	ZONA KNO	OWN PLACE OF BUSIN	NESS ADDRESS	CHANGE:					
9.1	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 conf	tinue						
		No – go	to number 9.2 and con	ntinue						
0.7	) If vo	u ancwere	1 "No" to number Q 1	give the <b>NEW o</b> l	weical or street a	ddraee (not a P.C	) Roy) of the known			
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 place of business of the LLC in Arizona:									
		Attention (op	otional)							
		Address 1								
		Address 2 (o	ptional)							
		City			State or	Zip				
		Country	UNITED STATES		Province					
		Country	and the second s							
o. 🗀	DURA	TION CHA	NGE - check one to	indicate the NEV	<b>N</b> duration or life pe	riod of the LLC:				
_		Perpetual								
			life period will end on t	his date	(e	enter a date – mm	/dd/vv)			
			life period will end upor				,, 44, 77,			
	Ц	THE LLC S	me period will end apol	in the occurrence	or and evene.		(1)			
			A Treft Milds about Montaine in addition and a stable				(describe an event)			
			to a PROFESSIONAL LL to a NON-PROFESSION							
2. 🗌	<b>PRO</b> I		L SERVICES CHANGE	<ul> <li>describe the</li> </ul>	<b>NEW</b> type of profes	ssional services th	e professional LLC will			
з. 🗌			MENT – if an amendn n to these Articles of Ar				boxes on this form, then dment.			
IGNAT	URE:		king the box marked "I with any attachments				ry that this document			
^	^			<b>√</b> 1 £	CCEPT					
	()	AT	ach	_			004545			
7)	00	ent !	Tatto		RT F. PATTON		08/17/17			
Signature FOLITE		check only	one and fill in the corre	Printed Nar Sponding blank		itv:	Date (mm/dd/yy)			
			managed LLC and I ar				LC and I am signing			
[Maind	dividua	lly as a ma	nager or I am signing	for an <b>entity</b>	individually as	a member or I a	am signing for an <b>entity</b>			
ma	anage	r named:			member nam	ned:				
Filing F	ee: \$2	25.00 (regu	lar processing)	Mail	: Arizona Corpora	ation Commission	- Corporate Filings Secti			
Expedit	ted pro	cessing – a	dd \$35.00 to filing fee		1300 W. Washii	naton St. Phoenis	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.