ARIZONA CORP COMMISSION FILED

NOV 17 2017

FILE NO. L- 21904000



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

**ARTICLES OF AMENDMENT** 

Read the Instructions L015i

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

Quick Restoration LLC

2.

A.C.C. FILE NUMBER: L21904000

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.

3. ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:

 MEMBERS CHANGE (CHANGE IN MEMBERS) - <u>see Instructions L015i</u> - Use one block per person -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." If more space is needed, complete and attach the <u>Amendment Attachment for Member form L044</u>.

Name currently shown in ACC records		Name currently shown in ACC records			
		NEW Name		1	
	·····	Address 1			
17		Address 2 (op	tional)		
AL	85201				
State or Province	Zip	City		State or Province	Zip
		Country			
nember			ss change	Add member	
ve member		Name	change	Remove membe	r
· · · ·		Name current	ly shown in ACC records		
-					
		NEW Name			
		NEW Name		0	
		NEW Name Address 1	9	5	
}			itional)	· · · · · · · · · · · · · · · · · · ·	
1		Address 1	itional)	· · · · · · · · · · · · · · · · · · ·	
State or	Zip	Address 1	itional)	State or Province	Zip
State or Province	Zip	Address 1 Address 2 (op City	vtional)	State or Province	Zip
	Zip	Address 1 Address 2 (op	vtional)		Zip
	Zip	Address 1 Address 2 (or City Country			Zip
	Province	State or Zip Province	Address 1 Address 1 Address 2 (op State or Province City Country nember ve member Name	Address 1 Address 2 (optional) State or Zip City Province Country Dember Address change	NEW Name         Address 1         Address 2 (optional)         State or Province         Zip         City         State or Province         City         State or Province         Country         Address change         Add member         Name change         Remove member

5.

**MANAGERS CHANGE (CHANGE IN MANAGERS)** – Use one block per person -To REMOVE a manager - list the name only of the manager being removed and check "Remove manager."

To ADD a manager - list the name and address of the manager being added and check "Add manager."

To CHANGE ADDRESS only - list the name and NEW address and check "Address change."

To CHANGE NAME of existing manager - list the current name, then the NEW name, and check "Name change." If more space is needed, complete and attach the Amendment Attachment for Managers form L043.

Name currently shown in ACC records		Name currently shown in ACC records				
NEW Name		NEW Name				
Address 1		Address 1				
Address 2 (optional)		Address 2 (optional)				
City State Provin		City	State or Zip Province			
Country		Country				
Address change 🛄 Add manager		Address change Add	manager			
Name change     Remove manager		Name change         Remove manager				

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- MANAGEMENT STRUCTURE CHANGE see Instructions L015i check only one box below and follow instructions. All persons will be listed on the appropriate Attachment form.
  - 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 L041. The filing will be rejected if it is submitted without the attachment.

7. STATUTORY AGENT CHANGE – NEW AGENT APPOINTED – see Instructions L015i:						
7.1 <i>REQUIRED</i> – give the <b>name</b> (can be an individual or an entity) <b>and <i>physical or street address</i></b> (not a P.O. Box) in Arizona of the NEW statutory agent:			7.2 OPTIONAL – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):			
Statutory Agent Name (required)						
Attention (optional)		r	Attention (opt	ional)		
Address 1			Address 1			
Address 2 (optional)			Address 2 (op	tional)		
City	State	Zip	City		State	Zip
7.3 REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of				icles of		

- Amendment.
- STATUTORY AGENT ADDRESS CHANGE - ADDRESS OF CURRENT STATUTORY AGENT - complete 8.1

	and/or 8.2:					
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 (op	tional)			Attention (optional)		
Address 1				Address 1		
Address 2(op	tional)			Address 2 (optional)		
City		State	Zip	City	State	Zip

8.

## 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

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- No go to number 9.2 and continue
- 9.2 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:

A	Attention (option	nal)		······	
A	ddress 1				
A	ddress 2 (optic	nal)		1	
L					
	City			State or Province	Zip
	Country	анцан (уларон жанан на			
10. DURATI		GE - check one to indicate the NE	W dur	ation or life perio	od of the LLC:
P	erpetual				
Пп	he LLC's life	e period will end on this <b>date</b> :		(ent	ter a date – mm/dd/yy)
 	he LLC's life	e period will end upon the occurrence	e of th	is <b>event</b> :	
					(describe an event)
11. 🔲 ENTITY	TYPE CH	ANGE - if changing entity type, ch	eck on	e and follow inst	ructions:
	hanging to	a PROFESSIONAL LLC - number 12	must	also be complete	d.
		a NON-PROFESSIONAL LLC (profes		-	
12. PROFES		SERVICES CHANGE - describe the	NEW	type of professi	onal services the professional LLC will
13. OTHER 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.					
<b>SIGNATURE:</b> By checking the box marked "I accept" below, I acknowledge <i>under penalty of perjury</i> that this document together with any attachments is submitted in compliance with Arizona law.					
			ACCEF	т	
$\leq$		Tom F	lucker	•	11/16/2017
Signature		Printed N			Date (mm/dd/yy)
-		e and fill in the corresponding blank	if sigr		·
	as a mana	naged LLC and I am signing ger or I am signing for an entity	X		er-managed LLC and I am signing member or I am signing for an entity d:
				Tom Rucker	
L					

Filing Fee: \$25.00 (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 he advised that A C C forms reflect only the minimum provisions requ	urod by stat	ute Vou should cook private legal councel for those matters that may pertain

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.