

AZ CORPORATION COMMISSION
FILED

AZ Corp. Commission



06233944

FEB 02 2018

FILE NO. L21876175

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

ARTICLES OF AMENDMENT

Read the Instructions L015

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

GUZZI + BROWN INVESTMENTS, LLC

2. **A.C.C. FILE NUMBER:** L21876175

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:

4. ☒ **MEMBERS CHANGE (CHANGE IN MEMBERS)** - see Instructions L015 - 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 Amendment Attachment for Member form L044.

Name currently shown in ACC records VANTAGE FBO MINDY BROWN				Name currently shown in ACC records John Guzzi			
NEW Name ROTH IRA				NEW Name			
Address 1 P.O. Box 2931				Address 1 P.O. Box 2931			
Address 2 (optional) PEORIA		State or Province AZ		Address 2 (optional) PEORIA		State or Province AZ	
City		Zip 85380		City		Zip 85380	
Country				Country			
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Add member <input type="checkbox"/> Remove member				<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Add member <input checked="" type="checkbox"/> Remove member			
Name currently shown in ACC records MINDY BROWN				Name currently shown in ACC records			
NEW Name P.O. Box 2931				NEW Name			
Address 1				Address 1			
Address 2 (optional) PEORIA		State or Province AZ		Address 2 (optional)		State or Province	
City		Zip 85380		City		Zip	
Country				Country			
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Add member <input checked="" type="checkbox"/> Remove member				<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Add member <input type="checkbox"/> 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 John Guzzi			Name currently shown in ACC records MINDY BROWN		
NEW Name P.O. BOX 2931			NEW Name P.O. BOX 2931		
Address 1			Address 1		
Address 2 (optional) PEORIA			Address 2 (optional) PEORIA		
City PEORIA	State or Province AZ	Zip 85380	City PEORIA	State or Province AZ	Zip 85380
Country			Country		
<input type="checkbox"/> Address change <input type="checkbox"/> Name change			<input checked="" type="checkbox"/> Add manager <input type="checkbox"/> Remove manager		
<input type="checkbox"/> Address change <input type="checkbox"/> Name change			<input type="checkbox"/> Address change <input type="checkbox"/> Name change		

6. ☒ **MANAGEMENT STRUCTURE CHANGE** - see Instructions L015 - 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 L015:

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 agent:		7.2 OPTIONAL - mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):	
Statutory Agent Name (required)			
Attention (optional)		Attention (optional)	
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City	State	Zip	City
7.3 REQUIRED - the <u>Statutory Agent Acceptance form M002</u> must be submitted along with these Articles of Amendment.			

8. ☐ **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 (optional)		Attention (optional)	
Address 1		Address 1	
Address 2 (optional)		Address 2 (optional)	
City	State	Zip	City

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

MANAGER STRUCTURE ATTACHMENT

- ENTITY NAME** – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
GUZZI + BROWN INVESTMENTS, LLC
- A.C.C. FILE NUMBER** (if known): L21876175
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 one box only to indicate what document the Attachment goes with:**
☐ Articles of Organization ☒ Articles of Amendment
☐ Application for Registration ☐ Articles of Amendment to Application for Registration
- MANAGERS / MEMBERS** – give the name and address of each and every manager and list all members who own 20% or more of the profits or capital of the LLC. Members who own less than 20% may also be listed, but it is not required. Check the appropriate box or boxes below each person listed – do not check both member boxes. If more space is needed, use another Manager Structure Attachment form.

Name <u>John Guzzi</u>			Name <u>MINDY BROWN</u>		
Address 1 <u>P.O. Box 2931</u>			Address 1 <u>P.O. Box 2931</u>		
Address 2 (optional) <u>PEORIA</u> <u>AZ</u> <u>85380</u>			Address 2 (optional) <u>PEORIA</u> <u>AZ</u> <u>85380</u>		
City <u>PEORIA</u> State or Province <u>AZ</u> Zip <u>85380</u>			City <u>PEORIA</u> State or Province <u>AZ</u> Zip <u>85380</u>		
Country <input checked="" type="checkbox"/> Manager <input checked="" type="checkbox"/> 20% or more member <input checked="" type="checkbox"/> Less than 20% member			Country <input checked="" type="checkbox"/> Manager <input checked="" type="checkbox"/> 20% or more member <input checked="" type="checkbox"/> Less than 20% member		
Name <u>VANTAGE SELF-DIRECTED</u>			Name <u>RETIREMENT PLANS FBO</u>		
Address 1 <u>MINDY BROWN ROTH IRA</u>			Address 1 <u>MINDY BROWN ROTH IRA</u>		
Address 2 (optional) <u>P.O. Box 2931</u>			Address 2 (optional) <u>P.O. Box 2931</u>		
City <u>PEORIA</u> <u>AZ</u> <u>85380</u>			City <u>PEORIA</u> <u>AZ</u> <u>85380</u>		
Country <input type="checkbox"/> Manager <input checked="" type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member			Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member		
Name <u></u>			Name <u></u>		
Address 1 <u></u>			Address 1 <u></u>		
Address 2 (optional) <u></u>			Address 2 (optional) <u></u>		
City <u></u> State or Province <u></u> Zip <u></u>			City <u></u> State or Province <u></u> Zip <u></u>		
Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member			Country <input type="checkbox"/> Manager <input type="checkbox"/> 20% or more member <input type="checkbox"/> Less than 20% member		

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 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:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

10. ☐ **DURATION CHANGE** - check one to indicate the NEW duration or life period 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 of this event:
_____ (describe an event)

11. ☐ **ENTITY TYPE CHANGE** - If changing entity type, check one and follow instructions:

- ☐ Changing to a PROFESSIONAL LLC - number 12 must also be completed.
☐ Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).

12. ☐ **PROFESSIONAL SERVICES CHANGE** - describe the NEW type of professional services the professional LLC will render:

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.

SIGNATURE: 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
Signature: John Guzzi Printed Name: John Guzzi Date (mm/dd/yy): 12/05/2017

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

<input checked="" type="checkbox"/> This is a manager-managed LLC and I am signing individually as a manager or I am signing for an entity manager named: <u>John Guzzi</u>	<input type="checkbox"/> This is a member-managed LLC and I am signing individually as a member or I am signing for an entity member named: _____
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Filing Fee: \$25.00 (regular processing)
Expedited processing - add \$35.00 to filing fee.
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission - Corporate Filings Section
1300 W. Washington St., Phoenix, Arizona 85007
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.

RECEIVED

FEB 02 2018

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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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

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

GUZZI + BROWN INVESTMENTS, 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 no abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS 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 reservations, or online certificates of good standing. We accept only Visa, MasterCard, and American Express.

REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):

<input checked="" type="checkbox"/> Email	Email address: <u>JIM T @ I LOVE EPS. COM</u>		
<input type="checkbox"/> Pick up	Name: <u>JAMES TEWALT</u>	Phone: <u>623-537-3657</u>	
<input type="checkbox"/> Mail	Name: <u>EPS-DOC-PREP, LLC</u>		
	Address: <u>6502 W. SOFT WIND DR.</u>		
	City: <u>GLENDALE</u>	State: <u>AZ</u>	Zip: <u>85310</u>
	Phone: <u>623-537-3657</u>		

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: _____ DATE: _____

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