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## ARTICLES OF AMENDMENT TO APPLICATION FOR REGISTRATION OF FOREIGN LLC

Read the Instructions L017i

	 K THE BOX NEXT TO EACH CHANGE BEING MADE AND LETE THE REQUESTED INFORMATION FOR THAT CHANGE.
2.	LLC NAME CHANGE - NAME IN STATE OR COUNTRY OF FORMATION (Foreign Name) - type or print the exact NEW name:
3.	LLC NAME CHANGE - NAME USED IN ARIZONA (Entity Name) - type or print the exact NEW name:
4.	ENTITY TYPE CHANGE – check one and follow instructions:  Changing to a PROFESSIONAL LLC – number 6 must also be completed.  Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).
5.	<b>PROFESSIONAL SERVICES CHANGE</b> – list the NEW type of professional services the professional LLC will render:
6.	FOREIGN DOMICILE CHANGE – list the NEW domicile state or country:
7.	PURPOSE / CHARACTER OF BUSINESS CHANGE – state the NEW purpose or character of business:
8.	<b>MEMBERS CHANGE (CHANGE IN MEMBERS)</b> – <u>see Instructions L017i</u> – if a change is being made with respect to one or more members, complete and attach the <u>Amendment Attachment for Members</u> form L044. The filing will be rejected if it is submitted without the attachment.

9.		beii Atta	ng made with	respect	to one or more	managers,	<ul> <li>see Instructions</li> <li>complete and attained</li> <li>be rejected if it is</li> </ul>	ach the	Amendment		
10.	✓		ANAGEMENT STRUCTURE CHANGE - <u>see Instructions L017i</u> - check only one box low 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.									
11.		ADDRESS IN FOREIGN DOMICILE (PRINCIPAL OFFICE ADDRESS) CHANGE – list the NEW address:									
							*				
			Attention (optional)								
			Address 1								
			Address 2 (optional)								
			Address 2 (optional)								
			City				State or Province	Zip			
12.	$\Box$	AD		/N DI A	CE OF BUSINI	ESS ADDRE	SE CHANGE:				
	12.	1	of the statuto				ddress the same a ober 13 and contin		reet address		
			or the statute	i y ugci		_	ber 12.2 and conti				
		_	76	d Wal-							
	12.	2					<b>NEW physical o</b> he LLC in Arizona:		address (not		
			(		ionii piaco oi b		TO LEG IT / IT ZOTIGE				
			4.1								
			Attention (optional)								
			Address 1								
			Address 2 (optional)								
			Address 2 (optional)								
			City				State or Province	Zip			
			Country								
13.	П	STA	TUTORY AGI	ENT CH	IANGE - NEW	AGENT	APPOINTED - see	- Instruc	rtions I 017is		
	13.1		QUIRED - give th			13.2					
		an	individual or an	entity) <b>ar</b>	nd <i>physical</i>		Statutory Agent, if	different fr			
or street address (not a P.O. Box) in Arizona of the NEW statutory agent:						(can be a P.O. Box):					
						•	•	***************************************			
Statut	ory Age	nt Nan	ne			_					
Statut	o, y rige										
Attention (optional)						Attention (optional)					
Addres	ss 1					Address 1					
Addres	ss 2 (op	tional)			1	Address 2 (op	tional)				
City			*	State	Zip	City		State	Zip		
	13.3	R	EQUIRED - the	Statutory /	Agent Acceptance form	M002 must be	submitted along with thes	e Articles of	Amendment		

14.1 NEW physical of (not a P.O. Box) existing statutor	in Arizona d		of the existing	14.2 NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):			
Attention (optional)		ž. – ž.	Attention (optional)				
warmen (optional)			recorded (optional)				
Address 1			Address 1				
Address 2(optional)	1	T	Address 2 (optional)		T		
City	State	Zip	City	State	Zip		
amendment or certified copy of to its delivery to SIGNATURE: By check	restatement of that fore the Ariz	ent of the Leign amend ona Corpor	endment to the Application for LLC's Articles in the foreign do dment, and it must be dated n ration Commission.  d "I accept" below, I acknowle	micile, you of more that	must attach a n 60 days prior penalty of		
amendment or certified copy of to its delivery to SIGNATURE: By check law that	restatement of that fore the Arizacking the latest this document.	ent of the Leign amend ona Corpor box marked ument toge Arizona law	LLC's Articles in the foreign do dment, and it must be dated n ration Commission.  d "I accept" below, I acknowle ether with any attachments is w.	micile, you of more that	must attach a n 60 days prior penalty of		
amendment or certified copy of to its delivery	restatement of that fore to the Ariz	ent of the Leign amend ona Corpor box marked ument toge Arizona law	LLC's Articles in the foreign do dment, and it must be dated n ration Commission.  d "I accept" below, I acknowle ether with any attachments is	micile, you of more that	must attach a n 60 days prior penalty of		
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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 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.

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## MANAGER STRUCTURE ATTACHMENT

- ENTITY NAME give the exact name of the LLC (foreign LLCs give name in domicile state or country):
   Federal Heath Sign Company, LLC
- 2. 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. Use one block per person. Check the appropriate box or boxes below each person listed. If more space is needed, use another Manager Structure Attachment form.

1.			12.			
r. Kevin S Stotmeister			Diane M Hendricks			
Name			Name			
2300 N Highway 121			690 Third St			
Address 1						
Address 2 (optional)			Suite 300 Address 2 (optional)			
	тх	76039	Beloit	WI	53511	
Euless	State or	Zip	City	State or	Zip	
UNITED STATES Province			UNITED STATES Province			
Country			Country			
✓ Manager	ber		✓ Manager	mber		
3.			4.			
Brent Fox	2		Jon Coulter	- Y		
Name			Name			
690 Third St			690 Third St			
			Suite 300			
Suite 300 Address 2 (optional)		·	Address 2 (optional)			
Beloit	WI	53511	Beloit	WI	53511	
City	State or	Zip	City	State or	Zip	
UNITED STATES	Province		UNITED STATES	Province		
Country			Country			
✓ Manager	ber		✓ Manager			
5.	· -		6.			
Diane M Hendricks Ente	rprises II	nc	<u> </u>			
Name			Name			
690 Third St			Address 1			
Suite 300			Address 1			
Address 2 (optional)		T	Address 2 (optional)	1		
Beloit	WI	53511				
City	State or Province	Zip	City	State or Province	Zip	
UNITED STATES	Province			Province		
Country			Country			
☐ Manager ✓ Mem	ber (100%	。)	Manager Member			