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

## **ARTICLES OF AMENDMENT**

						ctions <u>L015i</u>			
1.	ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:								
	TERRY AND CHARLOTTE YOUNG, PLLC								
2.	A.C.C. FILE N	UMBER:							
	Find the A.C.C.	ile number on th	e upper corner o	f filed documen	ts OR o	n our website at: htt	p://www.azo	cc.gov/Divisions	Corporations
	ECK THE BO MPLETE TH					ADE AND HAT CHANGE	ī.		
3.	ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:								
	TERRY YOUNG AND CHARLOTTE YOUNG, PLLC								
4.									
Nam	e currently shown in	ACC records			Name currently shown in ACC records				
NEW	Name				NEW Name				
	Name				NEW Home				
Addr	ess 1				Address 1				
Addr	ess 2 (optional)				Address 2 (optional)				
City			State or	Zin	City			State or	Zip
City	State or Zip Province			City			Province	219	
Cour					Countr	•			
$\vdash$	Address change Add as 20% or more member			Add as 20% or more member  Name change  Add as less than 20% member					
П	Name change				Name change		is iess than 2 ove member	0% member	
		Keino	ve member					, ve member	
Name currently shown in ACC records				Name currently shown in ACC records					
NEW Name					NEW Name				
Address 1					Address t				
Address 1					Address 1				
Addr	Address 2 (optional)				Address 2 (optional)				
City	City State or Zip Province			City			State or Province	Zip	
Country				Country					
Address change Add as 20% or more member					Address change	Add a	as 20% or mo	re member	
	Name change Add as less than 20% member					Name change	Add a	s less than 2	0% member

Remove member

Remove member

5.	IN A.C.C. RECO that manager FOR NEW MAN	ORDS - list (new name AGERS - <b>i</b>	the name and/or ad n a separa	of each man dress), then ate block, li	nager being on theck all boost the name	chang exes to in the	e one block per pers ged, and below that pro that apply to indicate the NEW Name blank and the Amendment Attack	ovide any ne he change b d give the ac	w information in the second contract with the	on for or that manager. check the
Name curre	ntly shown in ACC	records				Name	e currently shown in ACC r	ecords		
NEW Name						NEW	Name			
Address 1						Address 1				
Address 2 (d	optional)					Address 2 (optional)				
City			<ul><li>State o</li><li>Provinc</li></ul>			City State or Zip Province				
Country						Coun	itry	,		
Addı	ress change	Add	as manag	ger		Address change Add as manager				-
Nam	ne change	Rem	ove mana	ager			Name change	Remo	ve manage	er
-	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 A	APPO	DINTED - <u>see Instr</u>	uctions LO	<u>15i</u> :	
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 Ag	ent Name (require	d)				-				
Attention (or	Attention (optional)					Atte	ention (optional)			
Address 1	Address 1					Add	lress 1			
Address 2 (o	ptional)					Add	lress 2 (optional)			
City			State	Zip		City			State	Zip
7.3	7.3 REQUIRED – the <u>Statutory Agent Acceptance</u> form M002 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 physic (not a P. O. statutory ago	Box) in A			g		8.2 NEW mail statutory a			na of the existing Box):
Attention (optional)				Attention (optional)						
Address 1	Address 1				Address 1					
Address 2(or	Address 2(optional)				Add	dress 2 (optional)				
City			State	Zip		City	/		State	Zip

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 agen								
		Yes – go to number 10 and continue	Yes – go to number 10 and continue						
		☐ No − go to number 9.2 and continue	No – go to number 9.2 and continue						
	9.2 If you answered "No" to number 9.1, give the <b>NEW physical or street address</b> (not a P.O. Box) of the know								
		place of business of the LLC in Arizona:	e of business of the LLC in Arizona:						
		Attention (optional)							
		Address 1							
		Address 1							
		Address 2 (optional)							
		Prov	e or Zip rince						
		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 <b>date</b> :	(enter a date – mm/dd/vv)						
		The LLC's life period will end upon the occurrence of this <b>ever</b>	,						
			(describe an event)						
11.		ENTITY TYPE CHANGE – if changing entity type, check one and for	ollow instructions:						
	Changing to a PROFESSIONAL LLC – number 12 must also be completed.								
		Changing to a NON-PROFESSIONAL LLC (professional LLC bed							
		changing to a Non-Thor Education in Education in Education	onling a regular ELO).						
12.		PROFESSIONAL SERVICES CHANGE - describe the NEW type or	f 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							
~~		TUDE:							
SIG	NAIL	TURE: By checking the box marked "I accept" below, I acknowledg together with any attachments is submitted in compliance w							
		I ACCEPT							
		Terry Young	12 / 09 / 2019						
Sigr	nature	, ,	Date (mm/dd/yy)						
REQ	UIRE	<b>RED</b> – check only one and fill in the corresponding blank if signing for	an entity:						
			a member-managed LLC and I am signing						
$  \Box$			ually as a <b>member or</b> I am signing for an <b>entity</b> er named:						
		inemp.							
_									
Fili	ng Fe	Fee: \$25.00 (regular processing) Mail: Arizona (	Corporation Commission - Corporate Filings Section						

Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable - see Instructions. 602-542-4100 Fax: 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.

1300 W. Washington St., Phoenix, Arizona 85007



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## **Document History**

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