ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: GALEN INTERIORS LLC

ENTITY ID: L12320880
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual

PROFESSIONAL SERVICES:

CHARACTER OF BUSINESS: Professional, Scientific, and Technical Services

MANAGEMENT STRUCTURE: Manager-Managed

NEW NAME

No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: GALEN HASENPFLUG

PHYSICAL ADDRESS: 919 W CLAREMONT ST, PHOENIX, AZ 85013 **MAILING ADDRESS:** 919 W CLAREMONT ST, PHOENIX, AZ 85013

KNOWN PLACE OF BUSINESS

919 W CLAREMONT ST, PHOENIX, AZ 85013

PRINCIPALS

Manager: GALEN HASENPFLUG - 919 W CLAREMONT ST, PHOENIX, AZ, 85013, USA - - Date of Taking

Office: 09/30/2005

Member: GALEN HASENPFLUG - 919 W CLAREMONT ST, PHOENIX, AZ, 85013, USA - - Date of Taking

Office: 09/30/2005

Member: Robert Denning - 919 W CLAREMONT ST, PHOENIX, AZ, 85013, USA - - Date of Taking Office:

01/07/2020

SIGNATURE

Manager: Galen Hasenpflug - 02/03/2020

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: Galen Interiors LLC								
CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.								
2. ENTITY NAME CHANGE — type or print the exact NEW name of the LLC in the space below:								
MEMBERS CHANGE (CHANGE IN MEMBERS) — see Instructions L015i — 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.								
1.	2.							
Name currently shown in ACC records Robert Denning	Name currently shown in ACC records							
919 W. Clavemont St.	NEW Name							
Address 1	Address 1							
Address 2 (optional) Phoenix AZ 85013	Address 2 (optional)							
United States Province	City State or Zip Province							
Country	Country							
Address change Add member Name change Remove member	Address change Add member Name change Remove member							
3.	4.							
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 or Province	City State or Zip Province							
Country Address change Add member	Country Address change Add member							
Name change Remove member	Name change Remove member							
_	_							

7	MANAGERS CHANGE (TO REMOVE a manager - lise TO ADD a manager - lise TO CHANGE ADDRESS OF TO CHANGE NAME of exist of the company of the compa	- list the n t the nam nly - list t	e and address of the many or the many of the many of the many of the current of t	anager be ne manag address ent name	er being added a and check "Addre then the NEW	and check ' ess change name, and	." check "Na	ame change."	
	Tillore space is necessar	, 00111,		2.					
Name currentl	y shown in ACC records			Name curre	ently shown in ACC rec	cords			
				NEW Name					
NEW Name									
Address 1				Address 1	Address 1				
Address 2 (op	tional)			Address 2	(optional)		Chaha ay	Zip	
City	V	State or Province	Zip	City			State or Province	Zip	
Country Address change Add manager Name change Remove manager				Country Address change Add manager Name change Remove manager					
	form L040. The f	ns will be ANAGER-M illing will b EMBER-MA rejected if	e listed on the ap MANAGED LLC — col e rejected if it is su MAGED LLC — com it is submitted with	mplete ar ubmitted uplete and hout the	ad attach the Mal without the attach attach the Mem attachment.	nager Structi	cture Attach	chment	
6. STATUTORY AGENT CHANGE – NEW AGENT A 6.1 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:				6.2 REQUIRED – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box): Check box if same as street address.					
Statutory Age	ent Name (required)								
Attention (optional)				Attentio	Attention (optional)				
Address 1				Address	1			32.1.120	
Address 2 (o	otional)			Address	2 (optional)		36		
City		State	Zip	City			State	Zip	
6.3	REQUIRED – the State Amendment.	utory Age	nt Acceptance form	M002 m	ust be submitted	l along with	n these Ar	ticles of	
7. 7.1	STATUTORY AGENT and 7.2: NEW physical or str	eet addr	ess	RESS OF	7.2 NEW mai	ling addre	ess in Ariz	ona of the existing	
	(not a P. O. Box) in A statutory agent:	rizona of t	he existing		statutory	agent (can	De a P.O.		
Attention (o	ptional)			Attenti	on (optional)				
Address 1			Addres	Address 1					
Address 2(o	ptional)	T		Addres	s 2 (optional)	no secondo		Para Landa C	
City		State	Zip	City			State	Zip	

8.		PRINCIPAL ADDRESS CHANGE:								
	8.1	Is the NEW principal address the same as the street address of the statutory agent?								
		Yes – go to number 9 and continue								
		□ No − go to number 8.2 and continue								
	8.2	If you answered "No" to number 8.1, give the NEW principal address (can be outside of Arizona and can be a P.O. Box.)								
		Attention (optional)								
		Address 1								
		Address 2 (optional)								
		City State or Zip Province								
9.		ENTITY TYPE CHANGE – if changing entity type, check one and follow instructions:								
		Changing to a PROFESSIONAL LLC – number 10 must also be completed.								
		Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).								
10.		PROFESSIONAL SERVICES CHANGE - describe the NEW type of professional services the professional LLC will								
		render:								
11.		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.								
STG	NATU	IRE: By checking the box marked "I accept" below, I acknowledge under penalty of law that this document								
510	· ·	together with any attachments is submitted in compliance with Arizona law.								
	1	✓ I ACCEPT								
	4		,							
_	ature	ALLY HASENPFLUS 02-03-202	. (
REQ	UIRE	D – check only one and fill in the corresponding blank if signing for an entity:								
X	I ar	m an individual authorized to sign this document. I am signing on behalf of an entity that is authorized to sign this document.								
		e: \$25.00 (regular processing) Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007								
All	fees a	are nonrefundable - see Instructions. Fax: 602-542-4100 //ised 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	individ cuments	ual needs of your business. s filed with the Arizona Corporation Commission are public record and are open for public inspection. uestions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.								