

Document Type: **Articles of Amendment - LLC**

Document Fee: **\$25.00**

Entity Name: **sm services, llc**

Additional Fee: **\$0.00**

Entity Information

Entity Name: sm services, llc

Entity Type: Domestic LLC

Entity ID: L22837510

Management Structure: Manager-Managed

Entity Email Address:

Formation Date: 05/01/2018


Status: Active

Effective Date: 03/31/2020

Effective Time: 03:17PM

Character of Business: Any legal purpose

Character of Business Sub Code:

 Perpetual (forever)

Update Entity Information

New Entity Name

Statutory Agent Information

Name

Attention

Address

Email

STEVEN J KNAPP

2700 N HAYDEN RD #2043 , SCOTTSDALE, AZ,
85257, USA

steve@seedless.media

Attention

Mailing Address

2700 N HAYDEN RD #2043 SCOTTSDALE, AZ, 85257, USA

Principal Address

Attention

Address

2700 N HAYDEN RD #2043 , SCOTTSDALE, AZ, 85257, USA

Principal Information

Management Structure: Manager-Managed

Title

Name

Attention

Address

Email

Date Taking
Office

Member

STEVEN KNAPP

2700 N. HAYDEN RD. #2043,
SCOTTSDALE, AZ 85257, USA

12/26/2018

Manager

Steven Knapp

2700 N HAYDEN RD #2043 ,
SCOTTSDALE, AZ 85257, USA

Uploaded Attachments

The eCorp system will create part of the Articles of Amendment from the information I have entered.

☒ I will upload only the text of the amendment to complete the filing. ☐ I will upload and use my own complete form as the official Articles of Amendment.

File Name

SM Articles of Amendment.pdf

SM Stat Agent Acceptance.pdf

Signature

By typing/entering my name, I intend to affix my electronic signature acknowledging that this electronic document is submitted in compliance with Arizona law. I certify that the information on the electronic document is true, complete, and accurate as of the date the electronic filing is submitted.

☒ I Agree

Signature: Ben Himmelstein

Title: Authorized Agent

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

ARTICLES OF AMENDMENT

Read the Instructions

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

SM Services, 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:

3. ☒ **MEMBERS CHANGE (CHANGE IN MEMBERS)** – – 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

<p>1. Richard N. Davis Name currently shown in ACC records</p> <p>NEW Name 111 W. Monroe Street Ste 1114 Address 1</p> <p>Address 2 (optional) Phoenix AZ 85003 City State or Province Zip UNITED STATES</p> <p>Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member</p>	<p>2. Name currently shown in ACC records</p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City State or Province Zip</p> <p>Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member</p>
<p>3. Name currently shown in ACC records</p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City State or Province Zip</p> <p>Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member</p>	<p>4. Name currently shown in ACC records</p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City State or Province Zip</p> <p>Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member</p>

4. ☒ **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

1. Richard N Davis			2. Steven Knapp		
Name currently shown in ACC records			Name currently shown in ACC records		
NEW Name 111 W Monroe Street Ste 1114			NEW Name 2700 N. Hayden Rd #2043		
Address 1			Address 1		
Address 2 (optional) Phoenix	AZ	85003	Address 2 (optional) Scottsdale	AZ	85257
City	State or Province	Zip	City	State or Province	Zip
UNITED STATES			UNITED STATES		
Country			Country		
<input type="checkbox"/> Address change <input type="checkbox"/> Add manager <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove manager			<input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager		

5. ☐ **MANAGEMENT STRUCTURE CHANGE –** – 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 form L040. *The filing will be rejected if it is submitted without the attachment.*
- ☐ CHANGING TO **MEMBER-MANAGED LLC** – complete and attach the form L041. *The filing will be rejected if it is submitted without the attachment.*

6. <input checked="" type="checkbox"/> STATUTORY AGENT CHANGE – NEW AGENT APPOINTED –					
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):		
Steven Knapp			<input checked="" type="checkbox"/> Check box if same as street address.		
Statutory Agent Name (required)					
Attention (optional) 2700 N. Hayden Rd #2043			Attention (optional)		
Address 1			Address 1		
Address 2 (optional) City Scottsdale	AZ State	85257 Zip	Address 2 (optional) City	State	Zip
6.3 REQUIRED – the form M002 must be submitted along with these Articles of Amendment.					

7. <input type="checkbox"/> STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT – complete 7.1 and 7.2:					
7.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent:			7.2 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) City	State	Zip	Address 2 (optional) 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 continue8.2 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 Province	Zip
Country		

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.**SIGNATURE:** By checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document together with any attachments is submitted in compliance with Arizona law.

DocuSigned by:

☒ I ACCEPT

Steven Knapp

3/31/2020

80F626BDA1904A8

Steven Knapp

Signature

Printed Name

Date (mm/dd/yy)

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

<input checked="" type="checkbox"/> I am an individual authorized to sign this document.	<input type="checkbox"/> I am signing on behalf of an entity that is authorized to sign this document.

Filing Fee: \$25.00 (regular processing) Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable – see Instructions.	Mail: Arizona Corporation Commission – Examination 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.

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

STATUTORY AGENT ACCEPTANCE*Please read Instructions*

- 1. ENTITY NAME** – give the **exact** name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Articles of Incorporation):

SM Services, LLC

- 2. STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

Steven Knapp

3. STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

DocuSigned by:

Steven Knapp

Steven Knapp

3/31/2020

80F826BDA1904A8
Signature

Printed Name

Date

REQUIRED – check only one:

☒ **Individual as statutory agent:** I am signing on behalf of myself as the individual (natural person) named as statutory agent.

☐ **Entity as statutory agent:** I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.

Filing Fee: none (regular processing)
Expedited processing – not applicable.
All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission - Examination 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.