

Document Type: **Statement of Change - LLC Principal Address/Stat Agent**

Document Fee: **\$5.00**

Entity Name: **EQUINOX ENTERPRISES, LLC**

Additional Fee: **\$0.00**

Entity Information

Entity Name: EQUINOX ENTERPRISES, LLC

Entity Type: Domestic LLC

Entity ID: L16137296

Management Structure: Member - managed

Entity Email Address: beth@equinoxjourneys.com

Formation Date: 07/02/2010

Status: Active

Effective Date: 05/13/2020

Effective Time: 11:48AM

I am the Statutory Agent for this entity changing only the Statutory Agent address ☒ Yes ☐ No

Statutory Agent Information

Name	Attention	Address	Email
ROBIN P WHITE		1441 CIRCULO JACONA , RIO RICO, AZ, 85648, USA	robinwhiteaz@gmail.com
Attention	Mailing Address		
	1441 CIRCULO JACONA RIO RICO, AZ, 85648, USA		

Principal Address

Attention	Address
	12B TUBAC ROAD , TUBAC, AZ, 85646, USA

Uploaded Attachments

You may upload any attachment as a **.pdf file**.

File Name

Change of Address for LLC.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: Elizabeth S White
Title: Member



Clear Form

Print Form

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

**LLC STATEMENT OF CHANGE
OF PRINCIPAL ADDRESS OR STATUTORY AGENT**
Read the Instructions L020i

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

Equinox Enterprises, LLC

2. ☐ **CHANGE IN EXISTING STATUTORY AGENT NAME ONLY** – if the *name only* of the existing statutory agent listed in ACC records has changed, but a new agent has not been appointed, check the box and give the new name of the existing statutory agent below:

- 2.1 **CHANGE IN EXISTING STATUTORY AGENT ADDRESS** – check all that apply and follow instructions:

- ☐ **STREET ADDRESS CHANGED** – complete number 2.2.
☐ **MAILING ADDRESS CHANGED** – complete number 2.3.

2.2 NEW STREET ADDRESS – give the NEW physical or street address (not a P.O. Box) in Arizona of the existing statutory agent:			2.3 NEW MAILING ADDRESS – give the NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box): <input type="checkbox"/> Check box if same as street address.		
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip

3. <input type="checkbox"/> NEW STATUTORY AGENT - if a new statutory agent is being appointed, check the box and complete the following for the NEW statutory agent :					
3.1 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:			3.2 REQUIRED - give the mailing address in Arizona of the NEW Statutory Agent (can be a P.O. Box):		
Statutory Agent Name					
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)		State	Zip	Address 2 (optional)	
City				City	
3.3 REQUIRED - if you are appointing a new statutory agent, the <u>Statutory Agent Acceptance form M002</u> must be submitted along with this Statement of Change form.					

4. PRINCIPAL ADDRESS: check only one and fill in the corresponding blank

☒ Same as Statutory Agent street address

☐ Same as Statutory Agent mailing address

 Give the **NEW mailing address** of the LLC:

Attention (optional)		
1441 Circulo Jacona		
Address 1		
Address 2 (optional)		
Rio Rico	AZ	85648
City	State or Province	Zip
Country	UNITED STATES <input type="checkbox"/>	

SIGNATURE – *see Instructions L020i for who is authorized to make changes:*

If the person signing this form is the existing statutory agent changing its own address, then by the signature appearing below, the existing statutory agent certifies *under penalty of law* that he or she has given the LLC named in number 1 above written notice of the address change.

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.

☒ I ACCEPT

<i>Elizabeth S. White</i> <small>Signature</small>	Elizabeth S. White <small>Printed Name</small>	5/13/2020 <small>Date</small>
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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. Elizabeth S White	<input type="checkbox"/> I am signing on behalf of an entity that is authorized to sign this document.
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Expedited or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for prices.

Filing Fee: \$5.00 (regular processing) All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
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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.