

Document Type: **Statement of Correction**

Document Fee: **\$0.00**

Entity Name: **Susan List PLLC**

Additional Fee: **\$0.00**

**Entity Information**

Entity Name: Susan List PLLC

Entity Type: Domestic Professional LLC

Entity ID: 23163575

Formation Date: 12/24/2020

Entity Email Address: info@oneplustax.com

Status: Active

**Select Document for Correction**

Entity Document: Articles of Organization (1/5/2021 4:15:49 PM)

**Incorrect Statement or Defective Execution**

Professional Services: Realtor

**Explanation**

The ARIZONA DEPARTMENT OF REAL ESTATE (ADRE) requires it to be

**Correct Statement or Execution**

The sole purpose of the Professional Limited Liability Company is to RENDER PROFESSIONAL REAL ESTATE SERVICES

**Uploaded Attachments**

You may upload any attachment as a .pdf file.

**File Name**

21012616214310.pdf

1015-articles-of-amendment.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: RAFAEL CARMONA

Title: Authorized Agent



Corporations Division

COMMISSIONERS

Lea Márquez Peterson - Chairwoman  
Sandra D. Kennedy  
Justin Olson  
Anna Tovar  
Jim O'Connor

Date: 1/26/2021

Delivered via: Email

Rafael Carmona

RE:   **Entity Name:**                    Susan List PLLC  
      **ACC Order Number:**        202101201085917  
      **Document Received Date:**   01/20/2021  
      **Rejected Document ID:**     9809620

If you submitted a payment, it has been deposited and is nonrefundable pursuant to A.R.S. § 29-851, unless otherwise noted below.

The document Statement of Correction you submitted is REJECTED for the following reasons:

**Rejection Comments:** Cannot file Statement of Correction to make necessary changes, must file Articles of Amendment separately.

**YOUR NEXT STEPS:**

Return the corrected document to us per the above instructions **with this rejection letter**. Please return the **entire** corrected document **no later than 30 days after the date of this letter** in order to keep your original filing date. If we receive the corrected document more than 30 days after the date of this letter, the original filing date will not apply; the corrected document's filing date would be the new received date if the document is approved for filing.

**YOU CAN RESUBMIT ONE OF THE FOLLOWING WAYS:**

**ONLINE - Only if:**

- You originally submitted online, and
- There are no payment issues noted above, and
- No new document type is required.

**BY PAPER - Only if:**

- You originally submitted by mail or over the counter, or
- There is a payment issue, or
- A different or new document type is required.

For **online** resubmission, log into your account and select the document under "My Rejected Filings."

For **paper** resubmission, return to the ACC the following:

1. All pages of the corrected or revised document, including any original attachments;
2. Any additional documents or forms required as noted in the above reasons for rejection;
3. Payment of any amounts owed as noted in the above reasons for rejection; and
4. A copy of this letter (we must have the Rejected Document ID).

If you have questions, review the Instructions to the document you submitted for more detailed information. You may also contact Customer Service at 602-542-3026 or, within Arizona only, 800-345-5819.

Division Director Tanya Gibson  
1300 W.Washington Street, Phoenix, AZ 85007 | 602-542-3026 | [azcc.gov](http://azcc.gov)

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:

Susan List PLLC

**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)** – [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](#).

<b>1.</b>				<b>2.</b>			
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	Zip	City		State or Province	Zip
Country				Country			
<input type="checkbox"/> Address change		<input type="checkbox"/> Add member		<input type="checkbox"/> Address change		<input type="checkbox"/> Add member	
<input type="checkbox"/> Name change		<input type="checkbox"/> Remove member		<input type="checkbox"/> Name change		<input type="checkbox"/> Remove member	
<b>3.</b>				<b>4.</b>			
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	Zip	City		State or Province	Zip
Country				Country			
<input type="checkbox"/> Address change		<input type="checkbox"/> Add member		<input type="checkbox"/> Address change		<input type="checkbox"/> Add member	
<input type="checkbox"/> Name change		<input type="checkbox"/> Remove member		<input type="checkbox"/> Name change		<input type="checkbox"/> Remove member	

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 "R"  
 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 [Amendment Attachment for Managers form L043](#).

<b>1.</b>			<b>2.</b>		
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 Province
Country			Country		
<input type="checkbox"/> Address change <input type="checkbox"/> Add manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager			<input type="checkbox"/> Address change <input type="checkbox"/> Add manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager		

5. ☐ **MANAGEMENT STRUCTURE CHANGE – [see Instructions L015i](#) – 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 [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.*

<b>6. <input type="checkbox"/> STATUTORY AGENT CHANGE – NEW AGENT APPOINTED – <a href="#">see Instructions L015i</a>:</b>					
<b>6.1 REQUIRED</b> – give the <b>name</b> (can be an individual or an entity) <b>and physical or street address</b> (not a P.O. Box) in Arizona of the NEW statutory agent:			<b>6.2 REQUIRED</b> – mailing address in Arizona of NEW Statutory Agent, if different from street address (can be a P.O. Box):		
			<input type="checkbox"/> Check box if same as street address.		
Statutory Agent Name (required)					
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
<b>6.3 REQUIRED</b> – the <a href="#">Statutory Agent Acceptance</a> form M002 must be submitted along with these Articles of Amendment.					

<b>7. <input type="checkbox"/> STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT – complete 7.1 and 7.2:</b>					
<b>7.1 NEW physical or street address</b> (not a P. O. Box) in Arizona of the existing statutory agent:			<b>7.2 NEW mailing address</b> in Arizona of the existing statutory agent (can be a P.O. Box):		
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2(optional)			Address 2 (optional)		
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 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:

The sole purpose of the PLLC is to RENDER PROFESSIONAL REAL ESTATE SERVICES

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.


☒ I ACCEPT

Rafael Carmona

01/20/2021

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

**Expedited or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for prices.**

Filing Fee: \$25.00 (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

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.