# ARTICLES OF AMENDMENT TO ARTICLES OF **ORGANIZATION**

### LIMITED LIABILITY COMPANY

### **ENTITY INFORMATION**

**ENTITY NAME:** GOLDEN GOAT ENTERPRISES, LLC

**ENTITY ID:** L22490763 **ENTITY TYPE:** Domestic LLC PERIOD OF DURATION: Perpetual

PROFESSIONAL SERVICES:

**CHARACTER OF BUSINESS:** Real Estate and Rental and Leasing

Member-Managed MANAGEMENT STRUCTURE:

## **NEW NAME**

No name change

### STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: **CELIA FORNO** 

PHYSICAL ADDRESS: 4801 N. VISTA DE LOMA SEGUNDA, TUCSON, AZ 85749 **MAILING ADDRESS:** 4801 N. VISTA DE LOMA SEGUNDA, TUCSON, AZ 85749

#### KNOWN PLACE OF BUSINESS

45 STATIONS WEST DRIVE, SEDONA, AZ 86336

# **PRINCIPALS**

Member: The Celia Forno Living Trust dtd 6-11-20 - Celia Grace Forno, Trustee, 4801 N. Vista De Loma Segunda, TUCSON, AZ, 85749, USA - - Date of Taking Office: 02/11/2021

### **SIGNATURE**

Member: Celia Forno - 02/11/2021

DO NOT WRITE ABO	OVE THIS LINE; RESERVED FOR ACC USE ONLY.						
ARTICI	LES OF AMENDMENT						
Read	d the Instructions <u>L015i</u>						
• ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:							
Golden Goat Enterprises, LLC							
CHECK THE BOX NEXT TO EACH CHANGE COMPLETE THE REQUESTED INFORMAT							
2. ENTITY NAME CHANGE - type or print the	e exact NEW name of the LLC in the space below:						
	7						
To REMOVE a member - list the name only to ADD a member - list the name and add to CHANGE ADDRESS only - list the name a To CHANGE NAME of existing member - list	of the member being removed and check "Remove member." ress of the member being added and check "Add member." and NEW address and check "Address change." the current name, then the NEW name, and check "Name change." ach the Amendment Attachment for Member form L044.						
	2.						
Celia Forno Name currently shown in ACC records	Name currently shown in ACC records						
Name currently shown in ACC records	Celia Grace Forno, Trustee - The Celia Forno Living						
NEW Name	NEW Name						
	Trust dated 6-11-20						
Address 1	4801 N Vista De Loma Segunda						
Address 2 (optional)	Address 2 (optional) Tucson AZ 85749						
State or ZIp Province	City State or Zip Province						
Country	Country						
Address change Add member	Address change Add member						
	Name change Remove member						
Name change							
	<b>4.</b> 						
lame currently shown in ACC records	Name currently shown in ACC records						
EW Name	NEW Name						
ddress 1	Address 1						
ddress 2 (optional)	Address 2 (optional)						
State or Zip Province	City State or Zip Province						
ountry	Country						
Address change	Address change Add member						
Name change Remove member	Name change Remove member						
T varie citalize TT variove member							

To ADD a manager To CHANGE ADDRE To CHANGE NAME (	' - list the : SS only - I of existing	NGE IN MANAGERS) the name only of the mame and address of the ist the name and NEW manager - list the currolete and attach the A	anager b he manag address rent name	eing removed and cl ger being added and and check "Address a then the NEW pan	check "A ".change	book Walana				
1.			2.							
Name currently shown in ACC records	Name currently shown in ACC records				5					
NEW Name										
NEW Name				NEW Name						
Address 1				Address i						
Address 2 (optional)	.		Address 2	(optional)						
City	State Provi		City			tate or	Zip			
Name change Re	d manage move mar		☐ Nai	dress change	Add ma Remove	manager				
form L040. Th  CHANGING TO  The filing will b	e filing wil MEMBER- e rejected CHANGI ne name ( hysical o	R-MANAGED LLC — con If be rejected if it is su MANAGED LLC — com if it is submitted with E — NEW AGENT can be an individual r street address the NEW statutory	bmitted solete and sout the a	without the attachment attach the Member attachment.  FED - see Instruction  REQUIRED - ma  Statutory Agent, if difference in the second in th	ent. Structur ons L015 iling add	re Attachme	ona of NEW (can be a P.O. Box):			
agent: Statutory Agent Name (required)			<u> </u>	Check box if sam	e as stre	et address				
Attention (optional)				Attention (optional)						
Address 1	Addrace 1				Address 1					
							· .			
Address 2 (optional)				2 (optional)						
6.3 REQUIRED - the Sta Amendment.	State tutory Age	zip ent Acceptance form	M002 mu	st be submitted alo		71416	zip :les of			
7. STATUTORY AGENT and 7.2:	ADDRES	S CHANGE - ADDR	ESS OF	CURRENT STATU	FORY A	SENT - co	mplete 7.1			
7.1 NEW physical or st (not a P. O. Box) in A statutory agent:				7.2 NEW mailing statutory age						
			<u>                                     </u>							
ttention (optional)				Attention (optional)						
Address 1			Address	1						
ddress 2(optional)	Ţ	1	Address	2 (optional)		T -				
lltv	State	Zip	aty			State	Zip			

City

0.074 8000 6074	8.	PR	RINCIPAL ADDRESS CHANGE:							
and a secondary	8.	.1 Is	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 y P.O	you answered "No" to number 8.1, give the <b>NEW principal address</b> (can be outside of Arizona and can be a							
			Attention (optional)							
			Address 1							
			Address 2 (optional)							
			Access 2 (optional)							
			City State or Zip Province							
		1	Country							
9.		ENTI	TTY 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.		PROF	<b>TESSIONAL SERVICES CHANGE</b> — describe the <b>NEW</b> type of professional services the professional LLC will er:							
11.		OTHER you m	R AMENDMENT — if an amendment was made that was not addressed by the check boxes on this form, then nust attach to these Articles of Amendment a complete copy of the LLC's written amendment.							
SIG	NATUR	tE:	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.							
	/	P	☑ I ACCEPT							
	ľW		Celia Forno Q - \( \begin{align*} \pi - \lambda \end{align*} \cdot  \tau \end{align*}							
Signa			Printed Name Date (mm/dd/yy)							
EQU	TKED	- cne	eck only one and fill in the corresponding blank if signing for an entity:							
X	I am	an ind	dividual authorized to sign this document.  I am signing on behalf of an entity that is authorized to sign this document.							
		_								

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)

Mail:

Arizona Corporation Commission - Examination Section

All fees are nonrefundable - see Instructions.

1300 W. Washington St., Phoenix, Arizona 85007

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.