

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

Document Fee: **\$0.00**

Entity Name: **CHANDRA HANSON PHOTOGRAPHY LLC**

Additional Fee: **\$0.00**

**Entity Information**

Entity Name: CHANDRA HANSON PHOTOGRAPHY LLC

Entity Type: Domestic LLC

Entity ID: L20497003

Management Structure: Member-Managed

Entity Email Address: chandrahansonphotography@gmail.com

Formation Date: 11/24/2015

Status: Active

Effective Date: 04/23/2021

Effective Time: 2:44 PM

Character of Business: Professional, Scientific, and Technical Services

Character of Business Sub Code: Photography Studios, Portrait

 Perpetual (forever)

Update Entity Information

**New Entity Name**

**Statutory Agent Information**

Name	Attention	Address	Email
Chandra Salene Thomas		747 E White Mountain Blvd, Suite 2, PINETOP, AZ, 85935, USA	chandrahansonphotography@gmail.com
Attention	Mailing Address	747 E White Mountain Blvd Suite 2, PINETOP, AZ, 85935, USA	

**Principal Address**

Attention	Address
	747 E White Mountain Blvd, Suite 2, PINETOP, AZ, 85935, USA

**Principal Information**

Management Structure: Member-Managed

Title	Name	Attention	Address	Email	Date Taking Office
Member	Chandra Thomas		747 E White Mountain Blvd, Suite 2, PINETOP, AZ 85935, USA	chandrahansonphotography@gmail.com	11/25/2015

**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**

Corporation Paperwork Chandra Hanson Photography.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: Chandra Thomas

Title: Member

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ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT  
\*\* ORDER COPIES USING A RECORDS REQUEST FORM \*\*

WHAT ARE YOU FILING?

☐ New Entity ☐ Change to existing entity ☒ Re-submission of rejected filing

ENTITY NAME - give the exact name of the entity as currently shown in A.C.C. records:

EXPEDITED PROCESSING? ☐ YES - select 1 option below ☒ NO - pay only the filing fee

NOTE: A current phone number is required for ALL Same Day/Next Day services. Same Day/Next Day service will not guarantee approval of submitted documents and only guarantees that the document(s) will be examined within the stated time frames. All fees are non-refundable. Document filing fees are listed on the bottom of each form or on the fee schedule on our website, <http://accrps.azccs.gov>, under the FAQs.

☐ EXPEDITED PROCESSING, ADD \$35.00

☐ SAME DAY SERVICE, ADD \$200.00

☐ TWO-HOUR SERVICE, ADD \$400.00

☐ NEXT DAY SERVICE, ADD \$100.00

PAYMENT:

☐ MOD Account #: Total amount to deduct:

Cash - do not mail cash. We do not accept bills over \$20.00.  
Checks or money orders - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or credit numbers; temporary checks (new accounts);  
or credit cards - may be used for in-person submissions, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa or MasterCard.

REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):  
NOTE: PHONE NUMBER REQUIRED FOR ALL RETURN DELIVERY OPTIONS

☒ Email

Email address REQUIRED:  
Phone number REQUIRED:

Chandrahansa Photography@gmail.com  
(928) 242-7616

☐ Pick up

Name:  
Phone number REQUIRED:

☐ Mail

Name:  
Address:  
City:  
State:  
Zip:  
Phone number REQUIRED:

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY:

DATE:

View current processing times at: <http://azcc.gov/docs/default-source/corps-files/document-processing-times.pdf>



## Corporations Division

## COMMISSIONERS

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

Date: 4/9/2021

Delivered via: Email

Chandra Hanson

## RE:

Entity Name: CHANDRA HANSON PHOTOGRAPHY LLC  
 ACC Order Number: 202103181165608  
 Document Received Date: 03/18/2021  
 Rejected Document ID: 9923135

If you submitted a payment, it has been deposited and is nonrefundable pursuant to A.R.5. § 29-3213, unless otherwise noted below.

The document Articles of Amendment - LLC you submitted is REJECTED for the following reasons:

**Rejection Comments:** The attached document changes must be consistent with the online e-file changes. Changes on attachment must include:

If changing the Management Structure it must be stated in section 5 and complete and attach the correct form stated.

Remove all information in section 3 and 4;  
 Section 6.1 and 6.2 must be completed.

## 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 | [GIBSON.T@AZSOS.COM](mailto:GIBSON.T@AZSOS.COM)

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## ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

## COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT  
 \*\* ORDER COPIES USING A RECORDS REQUEST FORM \*\*

## WHAT ARE YOU FILING?

☐ New Entity ☐ Change to existing entity ☒ Re-submission of rejected filing

ENTITY NAME - give the exact name of the entity as currently shown in A.C.C. records:

*Chandra Hanson Photography LLC*

EXPEDITED PROCESSING? ☐ YES - select 1 option below ☒ NO - pay only the filing fee

NOTE: A current phone number is required for ALL Same Day/Next Day services. Same Day/Next Day service will not guarantee approval of submitted document(s) and only guarantees that the document(s) will be examined within the stated time frames. All fees are nonrefundable. Document filing fees are listed on the bottom of each form or on the fee schedule on our website, <http://ecorp.azcc.gov>, under the FAQs.

☐ EXPEDITED PROCESSING, ADD \$35.00 ☐

SAME DAY SERVICE, ADD \$200.00  
 Document will be examined by 10:00am MST

☐ TWO-HOUR SERVICE, ADD \$400.00 ☐

NEXT DAY SERVICE, ADD \$100.00  
 Document will be examined by 5:00pm MST on the next business day. Must be received by 5:00pm MST

## PAYMENT:

☐ MOD Account #:

Total amount to deduct:

☐ CASH - do not mail cash. We do not accept bills over \$20.00. Cash may be used only for in-person submissions at the Phoenix office ONLY (Tucson does not accept cash).

Checks or money orders - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or check numbers; temporary checks (new accounts); credit cards - may be used for in-person submissions, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa or MasterCard.

REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):

NOTE: PHONE NUMBER REQUIRED FOR ALL RETURN DELIVERY OPTIONS

<input checked="" type="checkbox"/> Email	Email address REQUIRED: <i>chandrahansonphotography@gmail.com</i>
	Phone number REQUIRED: <i>(928) 242-7416</i>
<input type="checkbox"/> Pick up	Name: _____ Phone number REQUIRED: _____
<input type="checkbox"/> Mail	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone number REQUIRED: _____

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: \_\_\_\_\_

DATE: \_\_\_\_\_

View current processing times at: <http://azcc.gov/docs/default-source/corps-files/document-processing-times.pdf>



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# ARTICLES OF AMENDMENT

Read the Instructions L0151

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

Chandra Hanson Photography, 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) - see Instructions L0151 - 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		Name currently shown in ACC records	
NEW NAME	<u>Chandra Hanson</u>	NEW NAME	
Address 1	<u>747 E. White Mtn Blvd</u>	Address 1	
Address (optional)	<u>Suite 12</u>	Address 2 (optional)	
CITY	<u>Payson</u>	CITY	
COUNTRY	<u>USA</u>	COUNTRY	
<input checked="" type="checkbox"/> Address change	<input type="checkbox"/> Add member	<input type="checkbox"/> Address change	<input type="checkbox"/> Add member
<input checked="" type="checkbox"/> Name change	<input type="checkbox"/> Remove member	<input type="checkbox"/> Name change	<input type="checkbox"/> 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		CITY	
COUNTRY		COUNTRY	
<input type="checkbox"/> Address change		<input type="checkbox"/> Address change	
<input type="checkbox"/> Name change		<input type="checkbox"/> Name change	
<input type="checkbox"/> Add member		<input type="checkbox"/> Add member	
<input type="checkbox"/> Remove member		<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 "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 Amendment Attachment for Managers form L043.

1. Name currently shown in ACC records		2. 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 manager	<input type="checkbox"/> Address change	<input type="checkbox"/> Add manager
<input type="checkbox"/> Name change	<input type="checkbox"/> Remove 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 L04D. 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 L04I. The filing will be rejected if it is submitted without the attachment.

6. ☒ **STATUTORY AGENT CHANGE - NEW AGENT APPOINTED** - see Instructions L015I:

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, if different from street address (can be a P.O. Box):			
Statutory Agent Name (required) <i>Chandra Thomas</i>				<input checked="" type="checkbox"/> Check box if same as street address.			
Attention (optional) <i>4715 White Mtn Blvd</i>				Address 1			
Address 2 (optional) <i>Suite 2</i>				Address 2 (optional)			
City	State	Zip		City	State	Zip	
<i>Phoenix</i>	<i>AZ</i>	<i>85035</i>					

6.3 REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment.

7. ☐ **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)				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: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**

Signature

Printed Name

Date (mm/dd/yy)

**REQUIRED** - check only one and fill in the corresponding blank if signing for an entity:☒ I am an individual 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)

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 602-542-3826 or (within Arizona only) 800-343-5819.

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

**STATUTORY AGENT ACCEPTANCE***Please read Instructions M0021*

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):

Chandra Hanson Photography, 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:

Chandra Thomas

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.

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.

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

Filing Fee: none (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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