Arizona Corporation Commission - RECEIVED: 9/6/2021
Arizona Corporation Commission - FILED: 8/7/2021

21090604021156

LLC - STATEMENT OF CHANGE

OF MEMBER OR MANAGER ADDRESSES

ENTITY INFORMATION

ENTITY NAME: TRUE WEALTH HOLDINGS #63, LLC
ENTITY ID: L16540110
ENTITY TYPE: Domestic LLC

PRINCIPALS

Member: CLIFTON NG - 15 Boronia Ct, Altona Meadows, Victoria, 3028, AUS - cliftonng@hotmail.com - Date of Taking Office: 02/14/2011

SIGNATURE

Member: Clifton Ng - 09/06/2021

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

LLC STATEMENT OF CHANGE OF MANAGER OR MEMBER ADDRESSES

Read the Instructions L021i

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

TRUE WEALTH HOLDINGS # 63, LLC

2. **MANAGER ADDRESSES** – for each manager being changed, list the name and address as currently shown on A.C.C. records and then give the new address for that manager. If more space is needed, submit another Statement of Change form.
If the person is also a member, also list their name, address, and new address in the Member Addresses section.

NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:
Name 1	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State / Zip	City / Country / State / Zip
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 2	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State / Zip	City / Country / State / Zip
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 3	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State / Zip	City / Country / State / Zip
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 4	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State / Zip	City / Country / State / Zip

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3. MEMBER ADDRESSES – for each member being changed, list the name and address as currently shown on A.C.C. records and then give the new address for that member. If more space is needed, submit another Statement of Change form. *If the person is also a manager, also list their name, address, and new address in the Manager Addresses section.*

NAME AND ADDRESS BEFORE CHANGES:	NEW ADDRESS ONLY:
Name 1: CLIFTON NG	
Address 1: 5 GATES CT	Address 1: 15 BORONIA CT
Address 2 (optional):	Address 2 (optional):
City: ALTONA MEADOWS / Country: AUSTRALIA; State: VICTORIA; Zip: 3028	City: ALTONA MEADOWS / Country: AUSTRALIA; State: VICTORIA; Zip: 3028
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 2	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country; State; Zip	City / Country; State; Zip
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 3	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country; State; Zip	City / Country; State; Zip
NAME AND ADDRESS BEFORE CHANGES:	**NEW ADDRESS ONLY:**
Name 4	
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country; State; Zip	City / Country; State; Zip

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
	CLIFTON NG	09/06/2021

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

☑ I am an **individual** authorized to sign this document. CLIFTON NG	☐ 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: $5.00 (regular processing) All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax (for Regular or Expedite Service ONLY): 602-542-4100 Fax (for Same Day/Next Day Service ONLY): 602-542-0900

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.

Corporations Division

Date: 8/26/2021 Delivered via: Email

Clifton Ng

RE:

Entity Name:	TRUE WEALTH HOLDINGS #63, LLC
ACC Order Number:	202108081363612
Document Received Date:	08/08/2021
Rejected Document ID:	10214261

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

The document Statement of Change - Member/Manager Addresses you submitted is REJECTED for the following reasons:

Rejection Comments:

Sign as an individual, you may not sign as your own entity.
New address was not provided in e-file. Resubmit with corrections.

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