

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

Document Fee: **\$0.00**

Entity Name: **Hidalgo Insulation LLC**

Additional Fee: **\$0.00**

Entity Information

Entity Name: Hidalgo Insulation LLC

Entity Type: Domestic LLC

Entity ID: 23103123

Management Structure: Manager-Managed

Entity Email Address: hidalgo.insulation@gmail.com

Formation Date: 05/11/2020


Status: Active

Effective Date: 04/05/2022

Effective Time: 11:54 AM

Character of Business: Construction

Character of Business Sub Code: Drywall and Insulation Contractors

 Perpetual (forever)

Update Entity Information

New Entity Name

New Entity Name: hidalgo insulation llc

Statutory Agent Information

| Name | Attention | Address | Email |
|----------------|--|---|------------------------|
| Gladys Arreola | | 5232 N Flores Ln, CASA GRANDE, AZ, 85194, USA | arr.gladys94@gmail.com |
| Attention | Mailing Address | | |
| | 5232 N Flores Ln CASA GRANDE, AZ, 85194, USA | | |

Principal Address

| Attention | Address |
|----------------|---|
| Gladys Arreola | 5232 N Flores Ln, CASA GRANDE, AZ, 85194, USA |

Principal Information

Management Structure: Manager-Managed

| Title | Name | Attention | Address | Email | Date Taking Office |
|---------|----------------|-----------|--|------------------------------|--------------------|
| Member | Noel Soto Leon | | 5232 N Flores Ln, CASA GRANDE, AZ 85194, USA | | 2/11/2022 |
| Manager | Gladys Arreola | | 5232 N FLORES LN, CASA GRANDE, AZ 85194, USA | hidalgo.insulation@gmail.com | |

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

Documents for 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: Gladys Arreola

Title: Manager



Corporations Division

COMMISSIONERS

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

Date: 4/21/2022

Delivered via: Email

Gladys Arreola

RE: Entity Name: Hidalgo Insulation LLC
ACC Order Number: 202204051663262
Document Received Date: 04/05/2022
Rejected Document ID: 10638677

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

Rejection Comments:

An attachment must include:

- Management Structure change.
- Updated principal address.
- Wrong attachment filed.

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

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:

HIDALGO INSULATION 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 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*.

| | | | | | | | |
|---|--|--|--|--|--|--|--|
| 1. NOEL SOTO LEON Name currently shown in ACC records NOEL SOTO LEON NEW Name 5232 N FLORES LANE Address 1 Address 2 (optional) CASA GRANDE AZ 85193 City UNITED STATES State or Province Zip Country <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | | | 2. Name currently shown in ACC records NEW Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | | |
| 3. Name currently shown in ACC records NEW Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | | | 4. Name currently shown in ACC records NEW Name Address 1 Address 2 (optional) City State or Province Zip Country <input type="checkbox"/> Address change <input type="checkbox"/> Add 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 "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. | | | 2. | | |
| 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 | <input type="text"/> | State or Province | City | <input type="text"/> | State or Province |
| 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 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.

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): | | |
| <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 |
| 6.3 REQUIRED – the <u>Statutory Agent Acceptance form M002</u> 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.)

| | | | |
|----------------------|---------------|-------------------|-------|
| GLADYS ARREOLA | | | |
| Attention (optional) | | | |
| 5232 N FLORES LANE | | | |
| Address 1 | | | |
| Address 2 (optional) | | AZ | 85193 |
| CASA GRANDE | | | |
| City | UNITED STATES | 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

gladys Arreola

Signature

GLADYS ARREOLA

Printed Name

04/26/22

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.

GLADYS ARREOLA

☐ 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 602-542-3026 or (within Arizona only) 800-345-5819.

Clear Form

Print Form

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

AMENDMENT ATTACHMENT FOR MEMBERS

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

HIDALGO INSULATION LLC

- 2. Check one box only to indicate what document the Attachment goes with:**

☒ Articles of Amendment ☐ Articles of Amendment to Foreign Registration Statement

- 3. MEMBERS CHANGE (CHANGE IN MEMBERS) – 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 Members.

| | | | | | |
|--|-------------------|-----------|---|-------------------|-----|
| Name currently shown in ACC records NOEL SOTO LEON | | | Name currently shown in ACC records | | |
| NEW Name 5232 N FLORES LANE | | | NEW Name | | |
| Address 1 | | | Address 1 | | |
| Address 2 (optional) CASA GRANDE | | AZ | 85193 | | |
| City UNITED STATES | State or Province | Zip | City | State or Province | Zip |
| Country <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | | Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | |
| 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 <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | | Country <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member | | |