ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: HOLDFAST RECOVERY, LLC

ENTITY ID: L22753705
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual

PROFESSIONAL SERVICES:

CHARACTER OF BUSINESS: Health Care and Social Assistance

MANAGEMENT STRUCTURE: Manager-Managed

FORMER ENTITY NAME

No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: PRESCOTT LAW GROUP PLC

PHYSICAL ADDRESS: 116 N SUMMIT AVE, PRESCOTT, AZ 86301 MAILING ADDRESS: 116 N SUMMIT AVE, PRESCOTT, AZ 86301

KNOWN PLACE OF BUSINESS

1579 West Gurley Street, PRESCOTT, AZ 86305

PRINCIPALS

Manager: Robert Jason White - 1042 Willow Creek Rd, Ste A101-465, PRESCOTT, AZ, 86305, USA - - Date of Taking Office:

Member: AsBeWe LLC - 8645 N Yearling Dr, PRESCOTT VALLEY, AZ, 86315, USA - tim@holdfastrecovery.com - Date of Taking Office: 06/01/2018

Member: Brendan McDonough, LLC - 3290 SUNFLOWER DR, PRESCOTT, AZ, 86305, USA - brendan@holdfastrecovery.com - Date of Taking Office: 04/04/2018

Member: IKON HOLDINGS LLC - 1042 Willow Creek Rd, Ste A101-465, PRESCOTT, AZ, 86301, USA - - Date of Taking Office:

SIGNATURE

Member: Timothy Hayden (AsBeWe LLC) - 09/23/2022

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

ARTICLES OF AMENDMENT

Read the Instructions L015i

 ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records: Holdfast Recovery, LLC

CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.

- ENTITY NAME CHANGE type or print the exact NEW name of the LLC in the space below:
- MEMBERS CHANGE (CHANGE IN MEMBERS) <u>see Instructions L015i</u> 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 <u>Amendment Attachment for Member form L044</u>.

| 1. Timothy Hayden | | | 2. ASBEWE LLC | | | | |
|---|----------------------|--|---|------------|--|----------------------|-------|
| Name currently shown in ACC records | | Name currently shown in ACC records | | | | | |
| NEW Name | | | NEW Name 8645 N Yearling Drive | | | | |
| Address 1 | | | Address 1 | | | | |
| Address 2 (optional) | | | | ott Valley | | AZ | 86315 |
| City State or Zip Province | | | City State or Zip Province | | | | |
| Country Address change Add member Name change Remove member | | | Country Address change X Add member Name change Remove member | | | | |
| BRENDAN MCDONOUGH Name currently shown in ACC records | | Brendan McDonough, LLC Name currently shown in ACC records | | | | | |
| NEW Name | | | NEW Name 3290 Sunflower Dr | | | | |
| Address 1 | | | Address 1 | | | | |
| Address 2 (optional) | | | Address 2 Pres | | | AZ | 86305 |
| City | State or Province | Zip | City | | | State or Province | Zip |
| Country Address change Add member Name change X Remove member | | | Country Address change X Add member Name change Remove member | | | | |

| To REMOVE a man To ADD a manage To CHANGE ADDR To CHANGE NAME If more space is n | nager - list the er - list the na ESS only - lis of existing m | e name only of the ame and address of t the name and N anager - list the o | e manager of the mana EW address current nan | bein ager being adde and check "Ad ne, then the NE" | dress change W name, and | e." d check "N | lame change." | | |
|--|---|---|---|---|-----------------------------|----------------------|---------------|--|--|
| 1. | | | 2. | | | | | | |
| Name currently shown in ACC records | | | Name cu | rently shown in ACC | records | | | | |
| NEW Name | | | NEW Nan | NEW Name | | | | | |
| Address 1 | | | Address | Address 1 | | | | | |
| Address 2 (optional) | | | Address | Address 2 (optional) | | | | | |
| | | | | | | | | | |
| City | State o | | City | | | State or Province | Zip | | |
| Country | | | Country | Country | | | | | |
| Address change | Add manager | | ☐ Ac | dress change | Add m | nanager | | | |
| ☐ Name change [→] | Remove mana | ager | ☐ Na | me change | Remo | ve manag | er | | |
| 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 AGE | NT CHANGE | - NEW AGEN | T APPOIN | TED - <u>see Inst</u> | ructions L01 | <i>5i</i> : | | | |
| 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): Check box if same as street address. | | | | | |
| Statutory Agent Name (required) | | | | _ | | | | | |
| Attention (optional) | | | Attentio | Attention (optional) | | | | | |
| Address 1 | | | Address | 1 | | | | | |
| Address 2 (optional) | | 1 | Address | 2 (optional) | | | | | |
| City | State | Zip | City | | | State | Zip | | |
| 6.3 REQUIRED - the s | Statutory Age | nt Acceptance for | m M002 m | ust be submitte | d along with | these Art | icles of | | |
| | | | | | | | | | |
| 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) | | | Attentio | Attention (optional) | | | | | |
| Address 1 | | | Address | Address 1 | | | | | |
| Address 2(optional) | | | Address | 2 (optional) | | | I | | |
| 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 Zip Province |
| | | Country |
| 10. 11. SIGN | | -, portary or rain and accument |
| | | together with any attachments is submitted in compliance with Arizona law. |
| | | X I ACCEPT |
| | | nothy Hayden Timothy Hayden 09/08/22 |
| Signa REQ | | Printed Name Date (mm/dd/yy) Date (mm/dd/yy) |
| | I ar | m an individual authorized to sign this document. I am signing on behalf of an entity that is authorized to sign this document. |
| | | ASBEWE LLC |
| pedi | ted o | or Same Day/Next Day services are available for an additional fee – see Instructions or Cover sheet for price |

Mail: Arizona Corporation Commission - Examination Section Filing Fee: \$25.00 (regular processing) 1300 W. Washington St., Phoenix, Arizona 85007 All fees are nonrefundable - see Instructions. 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.