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

	OF AMENDMENT Instructions L015i
1. ENTITY NAME – give the exact name of the LLC as cur	
APPRAISAL X PRES.	OF TEMPE LY
CHECK THE BOX NEXT TO EACH CHANGE BEI	
2. ENTITY NAME CHANGE – type or print the exact	NEW name of the LLC in the space below:
STRONGARM PILL	OT STRVICE LLC
To REMOVE a member - list the name and address of To CHANGE ADDRESS only - list the name and NEV	see Instructions L015i – Use one block per person - nember being removed and check "Remove member." the member being added and check "Add member." V address and check "Address change." rent name, then the NEW name, and check "Name change."
1. Coass Agmis and i	2.
Name currently shown in ACC records	Name currently shown in ACC records
NEW Name	NEW Name
Address 1 4709 S. TAYLOR DR	Address 1
	700103
Address 2 (optional)	Address 2 (optional)
City State or Province 2 85282	City State or Zip Province
Country	Country
Address change Add member Name change Remove member	Address change Add member Name change 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 State or Zip Province	City State or Zip Province
Address change Add member	Country Address change Add member
☐ Name change ☐ Remove member	Name change Remove member

L015.009 Rev: 5/2020

,	MANAGERS CHANGE To REMOVE a manage To ADD a manager - To CHANGE ADDRESS To CHANGE NAME of e If more space is neede	r - list th list the n only - lis existing n	e name only of the name and address of the the name and NEW nanager - list the cur	nanager b the mana / address rent nam	eing removed a ger being added and check "Add e, then the NEV	and check " d and check dress chang V name, an	(" <i>f</i> je." d c	240509114785
1.				2.				
None constant	1- 400							
	ly shown in ACC records	TOR	11 /_	Name curr	ently shown in ACC	records		
NEW Name	4709 S. T.	511001	2 2	NEW Name	9			
	4107 5, 7,	1410	12 DIZ					
Address 1				Address 1				
Address 2 (op	tional)			Address 2	(optional)			
City	15mps	State of Province	#2 85 Z82	City		~	State or Province	Zip
Country				Country				
_ Addire		manager			dress change		nanager	
Name	change Rem	ove man	ager	∐ Nai	me change	Remo	ve manag	ger
6. 6.1	The filing will be STATUTORY AGENT REQUIRED – give the or an entity) and phy (not a P.O. Box) in Air	CHANGE name (can be an individual	APPOIN	TED – <u>see Instr</u> REQUIRED –	ructions L01	1 <u>5i</u> : dress in A	,
	agent:				Check box if	same as str	eet addre	ess.
Statutory Ager	nt Name (required)							
Attention (opti	onal)			Attention	(optional)			
Address 1				Address				
Address 2 (opt	ional)			Address 2	(optional)			
City		State	Zip	City			State	Zip
6.3	REQUIRED – the State Amendment.	itory Age	ent Acceptance form	M002 mu	st be submitted	along with	these Ar	ticles of
	STATUTORY AGENT and 7.2:	ADDRES	S CHANGE – ADDR	ESS OF (CURRENT STAT	TUTORY A	GENT - c	omplete 7.1
	NEW <i>physical or str</i> (not a P. O. Box) in Ar statutory agent:			7		ling addre		ona of the existing Box):
Attention (opti	onal),		DD DD	Attention	(optional)	Cin	ligh	0.0

Stat 12 Zip 85282

Address 2(optional)

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.) Address 1 Address 1 Address 2 (optional) City		PRINCIPAL A				
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 Country Province Changing to a PROFESSIONAL LLC - number 10 must also be completed. Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC). PROFESSIONAL SERVICES CHANGE – describe the NEW type of professional services the professional LLC will render: 1. OTHER AMENDMENT – if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment. 1. OTHER AMENDMENT – if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment. 1. OTHER AMENDMENT – if an amendment was made that was not addressed by the check boxes on this form, the you must attach to these Articles of Amendment a complete copy of the LLC's written amendment. 1. ACCEPT Control of the New York of the New Yo	8.1	Is the NEW pri	ncipal address the same	as the street address	s of the statuto	ry agent?
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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.