

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: QUEEN CREEK RENTALS LLC
ENTITY ID: 23453371
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES:
CHARACTER OF BUSINESS: Real Estate and Rental and Leasing
MANAGEMENT STRUCTURE: Manager-Managed

FORMER ENTITY NAME No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: GREG LUTOWSKY
PHYSICAL ADDRESS: 15169 N. SCOTTSDALE ROAD, SUITE 205, SCOTTSDALE,
AZ 85254
MAILING ADDRESS: 15169 N. SCOTTSDALE ROAD, SUITE 205, SCOTTSDALE,
AZ 85254

KNOWN PLACE OF BUSINESS

Att: Queen Creek Rentals, 24871 S. Ellsworth Road, Suite 100-132, QUEEN CREEK, AZ 85142

PRINCIPALS

Manager: Right Construction, LLC - Queen Creek Rentals, 24871 S. Ellsworth Road, Suite 100-132, QUEEN CREEK, AZ, 85142, USA - Wilbur.johnson@gmail.com - Date of Taking Office:

SIGNATURE

Authorized Agent: Chris Gonzales - 11/19/2024

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:

Queen Creek Rentals 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](#).

<p>1. Wilbur Johnson <small>Name currently shown in ACC records</small></p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input type="text"/> State or Province <input type="text"/> Zip <input type="text"/></p> <p>Country</p> <p> <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member </p>	<p>2. Gena Johnson <small>Name currently shown in ACC records</small></p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input type="text"/> State or Province <input type="text"/> Zip <input type="text"/></p> <p>Country</p> <p> <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member </p>
<p>3.</p> <p><small>Name currently shown in ACC records</small></p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input type="text"/> State or Province <input type="text"/> Zip <input type="text"/></p> <p>Country</p> <p> <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member </p>	<p>4.</p> <p><small>Name currently shown in ACC records</small></p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City <input type="text"/> State or Province <input type="text"/> Zip <input type="text"/></p> <p>Country</p> <p> <input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member </p>

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 "R"
 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" value="UNITED STATES"/>	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. <input checked="" type="checkbox"/> 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):		
Greg Lutowsky			<input checked="" type="checkbox"/> Check box if same as street address.		
Statutory Agent Name (required)					
Attention (optional)			Attention (optional)		
15169 N. Scottsdale Road, Suite 205					
Address 1			Address 1		
Address 2 (optional)		AZ	85254		
City	Scottsdale	State	Zip	City	State
6.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment.					

7. <input type="checkbox"/> 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

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)			
24871 S. Ellsworth Road, Suite 100-132			
Address 1			
Address 2 (optional)		AZ	85142
Queen Creek			
City	Country	State or Province	Zip
	UNITED STATES		

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

Wilbur Johnson

Wilbur Johnson

11/18/2024

Signature

Printed Name

Date (mm/dd/yy)

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

<input checked="" type="checkbox"/> I am an individual authorized to sign this document. <input type="text" value="Member"/>	<input type="checkbox"/> I am signing on behalf of an entity that is authorized to sign this document. <input type="text"/>
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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
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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.






QC - Articles of Amendment

Final Audit Report

2024-11-18

Created:	2024-11-18
By:	Greg Lutowsky (greg@lifeplanningteam.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAaaqObm-tT_T93PtBCBe-lcWlUvVxjlt1

"QC - Articles of Amendment" History

-  Document created by Greg Lutowsky (greg@lifeplanningteam.com)
2024-11-18 - 6:12:43 PM GMT
-  Document emailed to Wilbur Johnson (wilbur.johnson@gmail.com) for signature
2024-11-18 - 6:12:47 PM GMT
-  Email viewed by Wilbur Johnson (wilbur.johnson@gmail.com)
2024-11-18 - 6:27:32 PM GMT
-  Document e-signed by Wilbur Johnson (wilbur.johnson@gmail.com)
Signature Date: 2024-11-18 - 6:28:01 PM GMT - Time Source: server
-  Agreement completed.
2024-11-18 - 6:28:01 PM GMT

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

STATUTORY AGENT ACCEPTANCE*Please read Instructions [M002i](#)*

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):

Queen Creek Rentals 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:

Greg Lutowsky

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.

Greg Lutowsky

Greg Lutowsky

11/18/2024

Signature

Printed Name

Date

REQUIRED – check only one:

<input checked="" type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual (natural person) named as statutory agent.	<input type="checkbox"/> 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.
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Expedited 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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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.






QC - Stat Agent Accpt

Final Audit Report

2024-11-18

Created:	2024-11-18
By:	Greg Lutowsky (greg@lifeplanningteam.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAakxjLF6a_5I355Y9VHxvnl6OO56gc0yiX

"QC - Stat Agent Accpt" History

-  Document created by Greg Lutowsky (greg@lifeplanningteam.com)
2024-11-18 - 6:20:44 PM GMT
-  Document emailed to Greg Lutowsky (greg@lifeplanningteam.com) for signature
2024-11-18 - 6:20:48 PM GMT
-  Email viewed by Greg Lutowsky (greg@lifeplanningteam.com)
2024-11-18 - 6:21:12 PM GMT
-  Document e-signed by Greg Lutowsky (greg@lifeplanningteam.com)
Signature Date: 2024-11-18 - 6:21:25 PM GMT - Time Source: server
-  Agreement completed.
2024-11-18 - 6:21:25 PM GMT

Clear Form

Print Form

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

MANAGER STRUCTURE ATTACHMENT

1. ENTITY NAME – give the exact name of the LLC (foreign LLCs – give name in domicile state or country):
 Queen Creek Rentals LLC

2. MANAGERS/MEMBERS - give the name and address of each and every **manager** and list all **members who own 20% or more** of the profits or capital of the LLC. **Use one block per person.** Check the appropriate box or boxes below each person listed. If more space is needed, use another [Manager Structure Attachment](#) form.

1. Right Construction, LLC			2.		
Name 24871 S. Ellsworth Road, Suite 100-132			Name		
Address 1			Address 1		
Address 2 (optional) Queen Creek		AZ	85142		
City	UNITED STATES	State or Province	Zip	City	UNITED STATES
Country			Country		
<input checked="" type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more			<input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more		
3.			4.		
Name			Name		
Address 1			Address 1		
Address 2 (optional)					
City	UNITED STATES	State or Province	Zip	City	
Country			Country		
<input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more			<input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more		
5.			6.		
Name			Name		
Address 1			Address 1		
Address 2 (optional)					
City		State or Province	Zip	City	
Country			Country		
<input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more			<input type="checkbox"/> Manager <input type="checkbox"/> Member owning 20% or more		

Clear Form

Print Form

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

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:

Queen Creek Rentals 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 5:00pm MST and must be received by 10:00am MST

TWO-HOUR SERVICE, ADD \$400.00
Document will be examined within 2-hours of submission
Must be received by 3:00pm MST

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 submittals 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 submittals, 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 : chris@lifeplanningteam.com		
	Phone number REQUIRED : chris@lifeplanningteam.com		
<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>