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

LLC STATEMENT OF CHANGE OF MANAGER OR MEMBER ADDRESSES

Read the Instructions <u>L021i</u>

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

2. MANAGER ADDRESSES and then give the new ac If the person is also a me	ldress for tha	t manager.	If more space is	needed, submit anothe	r Statement	of Change form.	
NAME AND ADDRESS BEFORE CHANGES:			NEW ADDR	NEW ADDRESS ONLY:			
Name 1							
Address 1	Address 1	Address 1					
Address 2 (optional)			Address 2 (Address 2 (optional)			
City	State	Zip	City		State	Zip	
Country			Country				
NAME AND ADDRESS BEFORE CHANGES:			NEW ADDR	RESS ONLY:			
N 2							
Name 2							
Address 1			Address 1	Address 1			
Address 2 (optional)			Address 2 (ontional			
Address 2 (optional)			Address 2 (эрсіонату			
City	State	Zip	City		State	Zip	
Country			Country				
NAME AND ADDRESS BEFORE CHANGES:			NEW ADDR	RESS ONLY:			
Name 3							
Address 1			Address 1	Address 1			
				Address 2 (optional)			
Address 2 (optional)			Address 2 (optional)			
City	State	Zip	City		State	Zip	
Country			Country				
NAME AND ADDRESS BEFORE CHANGES:			NEW ADDR	RESS ONLY:			
Name 4							
Address 1			Address 1	Address 1			
Address 2 (optional)			Address 2 (ontional)			
radicos 2 (optional)			Addicas 2 (spainial)			

City

Country

Zip

L021.006 Rev: 12/2021

City

Country

Zip

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 Address 1 Address 1 Address 2 (optional) Address 2 (optional) City State Zip City State Zip Country Country NAME AND ADDRESS BEFORE CHANGES: NEW ADDRESS ONLY: Name 2 Address 1 Address 1 Address 2 (optional) Address 2 (optional) State State City Zip City Zip Country NAME AND ADDRESS BEFORE CHANGES: **NEW ADDRESS ONLY:** Name 3 Address 1 Address 1 Address 2 (optional) Address 2 (optional) Zip Zip City State City State NAME AND ADDRESS BEFORE CHANGES: NEW ADDRESS ONLY: Name 4 Address 1 Address 1 Address 2 (optional) Address 2 (optional) State City Country Country **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 Date **REQUIRED** – check only one and fill in the corresponding blank if signing for an entity: I am signing on behalf of an entity that is I am an **individual** authorized to sign this document. 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. Mail: Arizona Corporation Commission - Examination Section Filing Fee: \$5.00 (regular processing) 1300 W. Washington St., Phoenix, Arizona 85007 All fees are nonrefundable - see Instructions. 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

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.