AZ Corp. Commission
04318387

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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

CORPORATION STATEMENT OF CHANGE OF KNOWN PLACE OF BUSINESS ADDRESS, PRINCIPAL OFFICE ADDRESS, OR STATUTORY AGENT

Read the Instructions C016i

***NOTE** – no matter what is being changed, numbers 1, 2, 3.1, 5.1, and 5.2 must be completed. The form will be rejected if those sections are not completed.*

1. ENTITY NAME – give the exact name of the corporation as currently shown in A.C.C. records:
PATRICK RANCH COMMUNITY ASSOCIATION

2. A.C.C. FILE NUMBER: 0721072-6
Find A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations

3. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:

3.1 *REQUIRED* – list the known place of business address currently shown in A.C.C. records (before any changes):			**3.2** *Optional* - List the NEW known place of business address in Arizona (must be a street or physical address):		
Jason Proudfit			Jason Proudfit		
Attention (optional)			Attention (optional)		
Rossmar & Graham Community Association Mgt.			FirstService Residential, Arizona, LLC		
Address 1			Address 1		
9362 East Raintree Drive			9000 East Pima Center Parkway, Suite 300		
Address 2 (optional)			Address 2 (optional)		
City Scottsdale	AZ State	85260 Zip	City Scottsdale	AZ State	85258 Zip

3.3 If you completed 3.2, is the NEW known place of business address in Arizona the same as the street address of the statutory agent? ☑ Yes ☐ No

4. PRINCIPAL OFFICE ADDRESS:

4.1 *Required if changing* – list the principal office address currently shown in A.C.C. records (before any changes):			**4.2** *Optional* - List the NEW principal office address (must be a street or physical address):		
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
Country			Country		

5. CURRENT OR EXISTING STATUTORY AGENT – list the name and addresses of the statutory agent as shown in the records of the Arizona Corporation Commission *before any changes* (this is the existing statutory agent):

5.1 *REQUIRED* – list the ***name*** and ***physical or street address*** (not a P.O. Box) in Arizona of the existing statutory agent:			**5.2** *REQUIRED* – list the **mailing address** (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:		
Jason Proudfit Statutory Agent Name					
Rossmar & Graham Community Association Mgt. Attention (optional)			Rossmar & Graham Community Association Mgt. Attention (optional)		
9362 East Raintree Drive Address 1			9362 East Raintree Drive Address 1		
Address 2 (optional) Scottsdale City	AZ State	85260 Zip	Address 2 (optional) Scottsdale City	AZ State	85260 Zip

5.3 ☐ **CHANGE IN EXISTING STATUTORY AGENT NAME ONLY** – if the *name only* of the existing statutory agent listed in number 5.1 above has changed, but a new agent has not been appointed, check the box and give the new name of the existing statutory agent below:

_____

5.4 **CHANGE IN EXISTING STATUTORY AGENT ADDRESS** – check all that apply and follow instructions:

☑ **STREET ADDRESS CHANGED** – complete number 5.5.

☑ **MAILING ADDRESS CHANGED** – complete number 5.6.

5.5 NEW STREET ADDRESS – give the NEW physical or street address (not a P.O. Box) in Arizona of the existing statutory agent:			**5.6 NEW MAILING ADDRESS** – give the NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):		
Jason Proudfit Attention (optional)			Jason Proudfit Attention (optional)		
FirstService Residential, Arizona, LLC Address 1			FirstService Residential, Arizona, LLC Address 1		
9000 East Pima Center Parkway, Suite 300 Address 2 (optional)			9000 East Pima Center Parkway, Suite 300 Address 2 (optional)		
Scottsdale City	AZ State	85258 Zip	Scottsdale City	AZ State	85258 Zip

6. ☐ **NEW STATUTORY AGENT** – if a new statutory agent is being appointed, check the box and complete the following for the **NEW statutory agent:**

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** *OPTIONAL* – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):		
Statutory Agent Name					
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip

6.3 *REQUIRED* – if you are appointing a new statutory agent, the Statutory Agent Acceptance form M002 must be submitted along with this Statement of Change form.

SIGNATURE – *see Instructions C016i for who is authorized to make changes:*

If the person signing this form is the existing statutory agent changing its own address, then by the signature appearing below, the existing statutory agent certifies *under penalty of perjury* that he or she has given the corporation named in number 1 above written notice of the address change.

By checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

☑ I ACCEPT

Signature	Printed Name	Date (mm/dd/yyyy)
	Jason Proudfit	06/15/2013

REQUIRED – check only one:

☐ I am the **Chairman of the Board of Directors** of the corporation filing this document.	☐ I am a duly-authorized **Officer** of the corporation filing this document.	■ I am a **Statutory Agent** changing only my own address and/or my own name.

Filing Fee: None (regular processing) Expedited processing – add $35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings 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.

ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

ARE YOU FILING: ☐ New Entity ☑ Change to existing entity ☐ Re-submission/Correction

PLEASE COMPLETE ALL APPROPRIATE SECTIONS

Type in Corp/LLC Name: PATRICK RANCH COMMUNITY ASSOCIATION [0721072-6]

FILING TYPE	REGULAR SERVICE FEE	EXPEDITED SERVICE FEE
☐ Articles of Domestication	☐ $100.00	☐ $135.00
☐ Articles of Incorporation (Profit)	☐ $ 60.00	☐ $ 95.00
☐ Articles of Incorporation (Non Profit)	☐ $ 40.00	☐ $ 75.00
☐ Articles of Organization (Limited Liability Company)	☐ $ 50.00	☐ $ 85.00
☐ Application For Authority (Business)	☐ $175.00	☐ $210.00
☐ Application to Conduct Affairs (Non Profit)	☐ $175.00	☐ $210.00
☐ Application for New Authority	☐ $175.00	☐ $210.00
☐ Application for Registration	☐ $150.00	☐ $185.00
☐ Articles of Amendment	☐ $ 25.00	☐ $ 60.00
☐ Articles of Amendment & Restatement	☐ $ 25.00	☐ $ 60.00
☐ Articles of Correction	☐ $ 25.00	☐ $ 60.00
☐ Articles of Merger/Share Exchange	☐ $100.00	☐ $135.00
☐ Articles of Merger (Limited Liability Company)	☐ $ 50.00	☐ $ 85.00
☐ Affidavit of Publication	☐ $ 0.00	☐ $ 35.00
☐ CORPORATIONS -Certified Copies* *If copies are for different entities the Expedite fee applies to each entity	☐ $5.00 Each (_____) (Enter Quantity)	☐ $40.00 (_____) (Enter Quantity)
☐ LLCs - Certified Copies* *If copies are for different entities the Expedite fee applies to each entity	☐ $10.00 Each (_____) (Enter Quantity)	☐ $45.00 (_____) (Enter Quantity)
☐ Good Standing Certificate* *If Good Standing Certificates are for different entities the Expedite fee applies to each entity	☐ $10.00 Each (_____) (Enter Quantity)	☐ $45.00 (_____) (Enter Quantity)
☑ Other: CORP. STATEMENT OF CHANGE	☐ Regular Fee	☐ Expedite Fee

SELECT PAYMENT TYPE: **DO NOT WRITE YOUR CREDIT CARD NUMBER ON THIS FORM!**

☐ Check — Check # _____ — Check Amount $ _____

☐ M.O.D. Account — MOD Acct # _____ — Mod Amount $ _____

☐ Cash -- for in-person filings only (Do not send cash in the mail.) — Cash Amount $ _____

☐ Credit Card -- for in-person filings only — CC Amount $ _____

☑ No fee required

SELECT ONE RETURN DELIVERY OPTION: ☐ Mail ☐ Pick Up ☐ Fax # (_____)_____

REQUIRED: Please list the person or company who will be picking up the completed documents.
DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY TWO WEEKS).

Person or Company Name: Elizabeth James - FirstService Residential

Phone Number: 480-551-4317

Address: 9000 East Pima Center Parkway, Suite 300

City: Scottsdale **State:** AZ **Zip:** 85258

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: _____ **DATE:** _____

View current process times at: www.azcc.gov/Divisions/Corporations