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

## AMENDED ARTICLES OF INCORPORATION NONPROFIT CORPORATION

Read the Instructions C011i

		oration: ted Jurisdiction Judges A	Association		
2.	inten		a. <b>NOTE</b> that the cha	aracter of affairs th	s the corporation initially at the corporation ultimately
	To in	nprove the welfare of A	Z Limited Jurisdiction	Judges and the judi	iciary of the State of Arizona.
3.	MEM	BERS – check one:		n WILL have memb n WILL NOT have n	
ŀ.	ARIZ	ZONA KNOWN PLACE	OF BUSINESS ADD	PRESS:	
	4.1	statutory agent?	<ul><li>place of business ad</li><li>Yes – go to number</li><li>No – go to number</li></ul>	5 and continue	the <b>street address</b> of the
	4.2	If you answered " <b>No</b> ' Box) of the known pla	' to number 4.1, give	e the <b>physical or s</b>	<b>treet address</b> (not a P.O. zona:
		Attention (optional)			
		Address 1			
		Address 2 (optional)			
		City		State or Province	Zip

corp		pace is			of each and every Di		
Sherwoo	od Johnston, III						
Name	Olina on Otmant			Name			
Address 1	Chicago Street			Address 1			
Address 2 (or Chandle		ΑZ	85225	Address 2 (	(optional)		
City		State or	Zip	City		State or	Zip
Country	UNITED STATES	Province	2	Country		Province	
Name				Name			
Address 1				Address 1			
Address 2 (o	ptional)			Address 2 (	(optional)	1	
City		State or Province		City		State or Province	Zip
Country				Country			
Name				Name			
Address 1				Address 1			
Address 2 (o	ptional)			Address 2 (	(optional)		
City		State o	zip	City		State or	Zip
Country		Province	е	Country		Province	
- o-	ATUTODY ACTUT	-					
	ATUTORY AGENT	– <u>see 1</u>	nstructions COL	<u>L1</u>			
6.1	1 REQUIRED - give an individual or an e or street address of the statutory age	entity) <b>an</b> (not a P.0	d <i>physical</i>	6	of statutory agent (		
Sherwoo	od Johnston, III						
	gent Name (required)						
Attention (o	ptional)			Attention	(optional)		
	Chicago Street				,		
Address 1				Address 1			
Address 2 (d		AZ	85225	Address 2	(optional)		
<sub>City</sub> Cha	ndler	State	Zip	City		State	Zip
6.3	3 REQUIRED - the these Articles of			<u>tance</u> fo	rm M002 must be su	bmitted	along with

201 E. Chicag Address 1  Address 2 (optional) Chandler City UNIT Country  SIGNATURE -		AZ 852	Add	ress 1			
Address 2 (optional) Chandler City UNIT Country		832	Add				
Chandler  City UNIT  Country		832		2 ( ) )			
City UNIT	ED STATES	832	25	ress 2 (optional)			
Country	ED STATES	Ct-t- 7in	25				
Country		State Zip	City		State	Zip	
·			Cou	ntry			
	compliance with			submitted in compliance with Arizona law.			
Signature			Si	gnature			
Printed Name Date			Date Pr	inted Name		Date	

7. **REQUIRED** - you must complete and submit with the Articles a <u>Certificate of Disclosure</u>. The Articles will be rejected if the Certificate of Disclosure is not simultaneously submitted.

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 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 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.