



State of Alaska
 Division of Corporations, Business and Professional Licensing
CORPORATIONS SECTION
 PO Box 110806
 Juneau, AK 99811-0806
 Phone: (907) 465-2550
 Fax: (907) 465-2974
 Website: www.commerce.state.ak.us/occ

DO NOT STAMP ABOVE THIS BOX

CORP

**NOTICE OF CHANGE OF MEMBERS
 AND/OR MANAGERS
 Domestic or Foreign Limited Liability Company**

(OFFICE USE ONLY)

Name of LLC _____ Alaska Entity # _____

Prior Information: Please provide *only* the name & title of the *prior* member and/or manager *being replaced*.

Name of <i>prior</i> member and/or manager <i>being replaced</i>	Title

If necessary use an 8½" x 11" sheet of paper and attach it to this form.

▶ **The LLC *must* have at least one member. Please list the name, address and % held of each person/entity owning at least 5% interest in the company**

New Information:

Please provide *only* the below information of the *replacements* for the above *prior* members and/or managers.

Title (▶ Indicates Required)	Name of the <i>replacement</i> for above <i>prior</i> member/manager	Mailing Address	City, State Zip	% Held
▶ Member <input type="checkbox"/> Manager				
<input type="checkbox"/> Member <input type="checkbox"/> Manager				
<input type="checkbox"/> Member <input type="checkbox"/> Manager				
<input type="checkbox"/> Member <input type="checkbox"/> Manager				

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➡ **This notice must be signed by an authorized person.**

Signature of Authorized Person	Title	Date

To resolve questions with this filing: Please be aware, this form will become public information.

Contact Name	Contact Phone Number

There are no fees associated with this filing. If there is a change in the registered agent of this limited liability company, a *Registered Agent Registered Address Statement of Change* form is required. Forms and additional information are available on our web site at <http://www.commerce.state.ak.us/occ>

Return this form to: State of Alaska
 Corporations Section
 PO Box 110806, Juneau, AK 99811-0806