



**ADMINISTRATIVE OFFICE OF THE COURTS  
CERTIFICATION AND LICENSING DIVISION  
Alternative Business Structures Program**

This form allows license holders to have specific information included in the public online directory the Certification and Licensing Division (CLD) maintains under the Arizona Code of Judicial Administration. Changes must be provided to CLD within 30 days of the change. Please email the completed form to [ABSProgram@courts.az.gov](mailto:ABSProgram@courts.az.gov)

---

License #: \_\_\_\_\_

**Directory:**

Alternative Business Structure Name: \_\_\_\_\_

Practice Area(s): \_\_\_\_\_

AZ Counties Served: \_\_\_\_\_ Phone #: \_\_\_\_\_

Business or Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Name of Designated Principal: \_\_\_\_\_

**Address Change:**

**Fill out the below detail if you are requesting an address change:**

Business or Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**I hereby authorize CLD to publish the information specified above in a public online directory.**

\_\_\_\_\_  
Signature of Designated Principal

\_\_\_\_\_  
Date

---

**CLD staff may contact me at (select one):** \_\_\_\_\_ Same as above \_\_\_\_\_ See below (not for publication)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_