## AZ CORPORATION COMMISSION FILED

AZ Corp. Commission
04022224

SEP 21 2012 FILE NO. L-1500001-5

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

ARTICLES OF AMENDMENT  Read the Instructions <u>L015i</u>								
1.	ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records:							
	WHETSTONE LLC							
2.	1 - 1500061-5							
	CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.							
3.	3. ENTITY NAME CHANGE type or print the exact NEW name of the LLC in the space below:							
4.	4. X  MEMBERS CHANGE (CHANGE IN MEMBERS) — see Instructions L015i — Use one block per person - FOR MEMBERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each member being changed, and below that provide any new information for that member (new name and/or address), then check all boxes that apply to indicate the change being made for that member. FOR NEW MEMBERS — in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, complete and attach the Amendment Attachment for Members form L044.							
	Collin Bruce							
Name	e currently shown in ACC records			Name ou	rrently shown in ACC	records		
NEW	Name - A A	NEW Name						
Addre	2540 E. MI	iky wai	1	Address 1				
Addre	ess 2 (optional)			Address	2 (optional)		<u> </u>	
City	Chandler	State or Province	85 295°	City			State or Province	Žip
Country  Address change Add as 20% or more member  Name change Add as less than 20% member  Remove member				Country  Address change Add as 20% or more member  Name change Add as less than 20% member  Remove member				
Name currently shown in ACC records			Name currently shown in ACC records					
NEW	Name			NEW Nar	пе			
Addre	ess 1			Address	i			···
Addre	ess 2 (optional)			Address	2 (optional)			
City		State or Province	Zip	City			State or Province	Zip
Coun	Address change Add as 20% or more member  Name change Add as less than 20% member  Remove member			·=	ddress change ame change	Add	as 20% or mo as less than 2 ove member	
1	kemov	e member		1		— ∠e…	AAC INGILIDE!	

IN A.C.C. RECORDS - lis that manager (new nam- FOR NEW MANAGERS - i	the name e and/or ad in a separa	of each manager being dress), then check all b <b>rte block, l</b> ist the name	chang oxes in th	that apply to indicate the ne NEW Name blank and	ide any nev e change be give the ad	w information ging made followed dress, and	on for or that manager. check the	
appropriate box. If mor	e space is i	needed, complete and a	nttacn	the Amenament Attachi	nent for Ma	nagers rom	1 (043.	
Name currently shown in ACC records			Nam	e currently shown in ACC re	nords			
Name corresponding stown in ACC records			April	is corresply shown in Acc to	LOIUS			
NEW Name	NEW Name							
Address 1		i	Addr	ress 1				
Address 2 (optional)			Addr	ress 2 (optional)	·	,		
City	State o		City			State or	Zip	
	Provinc	9e				Province		
Country			Cour				_	
	as manag	_	님	Address change		s manager		
Name change Ren	nove mana	ager	Ш	Name change	Kento	ve manage	=r 	
form L040. The	filing will MEMBER-M	be rejected if it is su	<i>ıbmit</i> plete	te and attach the <u>Mar</u> tted without the attac and attach the <u>Memi</u> the attachment.	hment.			
7. STATUTORY AGENT	CHANGE	- NEW AGENT	APP	OINTED - <u>see Instru</u>	ctions L01	<i>5i</i> :		
7.1 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:				7.2 OPTIONAL - mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):				
Statutory Agent Name (required)								
Attention (optional)	Attention (optional)							
Accention (opconer)	Presentati (aprolati)							
Address 1			Adk	dress 1			· · · · · · · · · · · · · · · · · · ·	
Address 2 (optional)	1		Add	dress 2 (optional)				
City	State	Zip	City			State	Zip	
<b>7.3</b> REQUIRED – the <u>Star</u> Amendment.	tutory Age	ent Acceptance form	M002	2 must be submitted a	along with	these Art	icles of	
8. STATUTORY AGENT and/or 8.2:	ADDRES	S CHANGE – ADDR	ESS	OF CURRENT STATE	UTORY A	GENT - co	mplete 8.1	
8.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent:				8.2 NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):				
Flint Nichard	$\sim$							
Flint Nichardson  Attention (optional)  1471 W. Swan Ct.				Attention (optional)				
Address 1	<u> </u>		Add	dress 1				
Address 2(optional)	AZ	85286	Ade	dress 2 (optional)		1		
chy Chundler	State	Zip	Cit	γ		State	Zip	

9.	XI.	ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:						
	9.1	Is the NEW Arizona known place of business address the same as the street address of the statutory agent?						
		▼ Yes - go to number 10 and continue						
		No – go to number 9.2 and continue						
,	9.2	If you answered "No" to number 9.1, give the <b>NEW physical or street address</b> (not a P.O. Box) of the known						
		place of business of the LLC in Arizona:						
		Attention (optional)						
		Address 1						
		Address 2 (optional)						
		City State or Zip Province						
		Country						
	_							
10.		DURATION CHANGE - check one to Indicate the NEW duration or life period of the LLC:						
		Perpetual Perpetual						
		The LLC's life period will end on this <b>date</b> : (enter a date - mm/dd/yy)						
		The LLC's life period will end upon the occurrence of this event:						
		(describe an event)						
	_							
11.		ENTITY TYPE CHANGE - if changing entity type, check one and follow instructions:						
		Changing to a PROFESSIONAL LLC – number 12 must also be completed.						
		Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).						
	,,,,,,,							
12.	Ш	<b>PROFESSIONAL SERVICES CHANGE</b> — describe the <b>NEW</b> type of professional services the professional LLC will render:						
	_							
13.		OTHER AMENDMENT — if an amendment was made that was not addressed by the check boxes on this form, then you must attach to these Articles of Amendment a complete copy of the LLC's written amendment.						
		you must attach to diese Articles of Americanent a complete copy of the LLC's written americanent.						
SIGN	IATU	IRE: 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.						
	Λ	/ (						
	4	I ACCEPT						
		Stronglee Flint Richardson 09/20/2012						
Signa		Printed Name Date (mm/dd/yy)						
KEQ		D - check only one and fill in the corresponding blank if signing for an entity:						
X		is a manager-managed LLC and I am signing This is a member-managed LLC and I am signing vidually as a manager or I am signing for an entity						
'		nager named: member named:						
		e: \$25.00 (regular processing) Mail: Arizona Corporation Commission - Corporate Filings Section						
		d processing - add \$35.00 to filing fee. 1300 W. Washington St., Phoenix, Arizona 85007						

All fees are nonrefundable - see Instructions.

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.