AZ CORPORATION COMMISSION FILED

AZ Corp. Commission
04179846

MAR 0 5 2013

FILE NO. L. 15739329

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

				FICLES (Read the I		ENDMEN [*] ons <u>L015i</u>	Т				
1.	ENT	ITY NAME - give the	exact name of the	ne LLC as curr	rently sho	wn In A.C.C. re	cords:				
	Win	noku, LLC									
_		C. FILE NUMBER: L	-1573932-9								
2.	A.C.	C. FILE NUMBER: the A.C.C. file number on	the upper corner o	f filed documer	nts OR on o	our website at: htt	tp://www.azd	c.gov/Divisions	/Corporations		
СН	ECK	THE BOX NEXT	TO EACH CH	ANGE BEI	NG MA	DE AND					
		ETE THE REQUE					5.				
3.	П	ENTITY NAME CHA	.NGE – type or pr	int the exact	NEW nam	ne of the LLC in	the space	below:			
			,,				·				
4.	7	MEMBERS CHANGE CURRENTLY SHOWN IN Information for that men that member. FOR NEW the appropriate box. If	A.C.C. RECORDS - mber (new name ar V MEMBERS - in a :	list the name of nd/or address), separate block	f each men then check c. list the n	nber being change all boxes that appared in the the contract of the contract o	ed, and belov oply to indica Name blank (w that provide a te the change t and give the ad	any new eing made for dress, and check		
Med	ena G	opakumar				-					
		ntly shown in ACC records			Name currently shown in ACC records						
ÑEW	Name				NEW Name						
NEW Name											
	ess 1				Address 1						
		Aurora Dr		T	Address 2	(optional)		I	· · · · · · · · · · · · · · · · · · ·		
	ndale	, <u>-</u>	AZ	85308		(opnonely					
City	ſ		State or Province	Zip	City			State or Province	Zip		
Cour	ntry				Country	<u> </u>					
	Addr	ress change 🔲 Add	d as 20% or more	e member	Ad	dress change	☐ Add a	as 20% or mo	ore member		
	Nam	e change 🔲 Add	d as less than 20	% member	│ □ Na	me change	Add a	as less than 2	0% member		
		✓ Rer	move member				Reme	ove member			
			····								
Name currently shown in ACC records					Name currently shown in ACC records						
NEW Name						NEW Name					
Address 1					Address 1						
Adda	ess 2 (d	optional)			Address 2	(optional)					
City			State or Province	Zip	City			State or Province	Zip		
Cou	ntry	_			Country						
			d as 20% or mor		$\perp =$	dress change	\equiv	as 20% or mo			
Ш	Nam		d as less than 20	% member	L_ Na	me change		as less than 2	10% member		
		L Re	move member				Щ кеm	ove member			

IN A.C.C. R	ECORDS - list	the name of	of each	manager being then check all bo	chang exes i	jed, that	and below that p apply to indicate	rovide the ch	any nev	v informatio ing made fo	r that manager.		
FOR NEW N	IANAGERS - I	n a separa	te bloc	ck. list the name	In th	e NE	W Name blank a Amendment Atta	nd giv	e the ad-	dress, and d	heck the		
appropriate	DOX. II MOF	e space is ii	leeded,	Complete and at	LLOCI	uic į	Amenoment Acco	ė		128212 (0.11.	10.00		
Name currently shown in A	CC records		 ,		Name currently shown in ACC records								
·					NEW Name								
NEW Name													
Address 1					Addr	ess 1				***	• •		
Address 2 (optional)							Address 2 (optional)						
City		State or Province		Zip	City					State or Province	Zip		
		Flovino						,	<u></u>				
Country					Cons	•							
Address change	e 🔲 Add	as manag	jer			Ad	dress change	Ш	Add as	s manager			
Name change	Ren	nove mana	ager	i		Na	me change		Remov	ve manage	r		
		·-··-		·					 				
☐ CHA	NGING TO /	MEMBER-M	IANAG		plete	and	without the att I attach the <u>Me</u> attachment.			ure Attach	ment form L041.		
7. STATUTO	RY AGENT	CHANGE	- NE	W AGENT	APP	OIN	TED - <u>see Ins</u>	trucți	ons LO1	5i:			
or an en	tity) and <i>pl</i>	ysical or	r stree	an individual et address EW statutory			7.2 OPTIONA NEW State				Arizona of P.O. Box):		
Statutory Agent Name (rec	uired)			<u>,,</u>									
Attention (optional)						entio	n (optional)						
					J								
Address 1					Ad	dress	1						
			η			dracc	2 (optional)			T			
Address 2 (optional)					i		2 (optionor)				7:-		
City		State	Zip		Cit					State	Zip		
7.3 REQUIRE Amendm		tutory Age	nt Acc	ceptance form	MUO)	z mi	ust be submitte	ea alo	ng with	inese Arti	cies di		
Amendiii													
		ADDRES	S CHA	NGE – ADDR	ESS	OF	CURRENT ST	ATUT	ORY A	GENT - co	mplete 8.1		
and/or 8.													
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):							
	, -												
Attention (optional)						Attention (optional)							
Address 1		· · · · · · · · · · · · · · · · · · ·	•		Address 1								
					N-	dress	2 (optional)			T			
Address 2(optional)							· = (optional)						
City		State	Zip		Ci	У				State	Zip		

9.		ARIZ	ZONA KNO	WN PLACE OF BUSINES	S ADDRES	S CHA	NGE:							
	9.1	Is the	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 contin	ue									
	9.2			I "No" to number 9.1, give s of the LLC in Arizona:	e the NEW p	hysic	al or street ad	idress (not a P.O. i	Box) of the known					
		}	Attention (op	tional)	····									
			Address 1					· · · ·						
			Address 2 (o	otional)				<u> </u>						
				,										
		ļ	City				State or Province	Zip						
		[Country											
		nun e	TTON 0114	NOT should and be lead	liaska kha ME	200 Aug	ation or life no	riad of the LLC:						
10. DURATION CHANGE - check one to indicate the NEW duration or life period of the LLC:														
			Perpetual											
								nter a date – mm/c	ld/yy)					
			The LLC's	life period will end upon t	eriod will end upon the occurrence of this event:									
									_ (describe an event)					
	_													
11.	\sqcup	ENTI	TTY TYPE CHANGE - if changing entity type, check one and follow instructions:											
			Changing	to a PROFESSIONAL LLC -	- number 12	must	also be comple	ted.						
			Changing	to a NON-PROFESSIONAL	LLC (profes	sional	LLC becoming a	a regular LLC).						
12.		PROF		L SERVICES CHANGE -	describe the	e NEW	type of profes	sional services the	professional LLC will					
		10												
13.	Ш	OTHE	R AMEND	MENT - if an amendmer to these Articles of Ame	nt was made	that v	vas not address	sed by the check bo C's written amendr	xes on this form, then					
		you	must attac	t to these Articles of Ame	nument a co	mpice	, copy or the LL	LC 3 William Gillion Gil						
SIG	NATI	URE:	By chec	king the box marked "I ac	cept" below,	I ack	nowledge <i>under</i>	r penalty of perjury	that this document					
			together	with any attachments is	submitted in	comp	liance with Ariz	ona law.						
			L		[7] +	ACCE!	er-		. 113					
. 1	1	4	2 1041											
X)	14	Vincenta Italian												
2519	nature			and fill in the course			ing for an anti-		Date (mm/dd/yy)					
REC						ır sığı			and I am cigning					
				managed LLC and I am s nager or I am signing for		courrence of this event: (description of this event: (description of this event: (description of the term of the event of the term of t								
			named:											
							Vineetha Kar	rtha						
	, '													

Filing Fee: \$25.00 (regular processing) Expedited processing - add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.

Arizona Corporation Commission - Corporate Filings Section Mail: 1300 W. Washington St., Phoenix, Arizona 85007

602-542-4100 Fax:

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.