ARIZONA CORP COMMISSION FILED

JAN 12 2016 FILE NO L-19 15571-6



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

			AR	TICLES ( Read the 1		ENDMEN <sup>.</sup> Ins <u>L015i</u>	Т		
1.	ENT	ITY NAME - give the ex	cact name of t	he LLC as cur	rently show	vn in A.C.C. re	cords:		
	WH	IITE HOUSE CREAT	IVE. LLC						
_		*** 1				<del></del>			
2.	A.C. Find	C. FILE NUMBER: L19 the A.C.C. file number on the	e upper corner	of filed docume	nts OR on ou	ır website at: hti	tp://www.az	cc.gov/Division	s/Corporations
СН		THE BOX NEXT TO					• • • • • • • • • • • • • • • • • • • •		
		ETE THE REQUEST					Ę.		
3.		ENTITY NAME CHANG	<b>iE –</b> type or pr	rint the exact	NEW name	e of the LLC in	the space	below:	
4.	V	MEMBERS CHANGE (CURRENTLY SHOWN IN A. information for that membethat member. FOR NEW Members of the appropriate box. If more	C.C. RECORDS - er (new name at EMBERS - <b>in a</b> :	list the name on nd/or address), separate bloci	f each memb then check a k, list the na	per being change all boxes that ap me in the NEW N	ed, and belo oply to indica Name blank :	w that provide a te the change b and give the ad	any new being made for  dress. and check
CA	RRIE	FLINN							
		ntly shown in ACC records	***		Name curre	ntly shown in ACC	records		•
NEW	Name				NEW Name				
222	6 E. C	CAROL AVE.							
Addı	ess 1		.eu		Address 1				
Addı	ess 2 (o	ptional)			Address 2 (	optional)	***************************************		
ME	SA		AZ	85204					
City	τ	UNITED STATES 🚽	State or Province	Zip	City		-	State or Province	Zip
Cour	itry	t of the hands	<u>,                                      </u>	<del></del> -	Country		. <u>-</u>		
	Addr	ess change 🔲 Add a	s 20% or more	e member	Add:	ress change	Add	as 20% or mo	ore member
	Nam	e change 🔲 Add a	s less than 20	% member	Nam Nam	ne change	Add a	as less than 2	.0% member
		<b>∠</b> Remo	ve member				Remo	ove member	
Nam	e curren	ntly shown in ACC records			Name curre	ntly shown in ACC	records		***
NEW Name					NEW Name				
Addr	ess 1				Address 1				
Addr	ess 2 (o	ptional)			Address 2 (	optional)			
City		$\subseteq$	State or Province	Zip	City		9	State or Province	Zip
Cour		ecc change	c 300/ au maa	a mamba-	Country	roca ab		200/	
님		- =	s 20% or more s less than 20'			ress change ne change		as 20% or mo as less than 2	
ئا			ve member	79 MICHIDEI	Li wan	.c change	=	os iess tilali z ove member	.070 MEMBER

5.	IN A.C.C. RECORDS - list that manager (new name FOR NEW MANAGERS - i	t the name e and/or ad in a separa	of each manager being dress), then check all back, list the name	<ul> <li>Use one block per person - FOR changed, and below that provide any oxes that apply to indicate the change in the NEW Name blank and give the ttach the Amendment Attachment for</li> </ul>	new information in the second	on for for that manager. check the
N		n.u.v.				
Name curre	ently shown in ACC records			Name currently shown in ACC records		
NEW Name			a représentation	NEW Name		
Address 1		-		Address 1		,
Address 2 (	optional)			Address 2 (optional)		
City		State o	r Zip	City	State or	Zip
	<u> </u>	Provinc	е		Province	
Country				Country		
' <b>=</b>		as manag			d as managei	ŀ
Nan	ne change	nove mana	ager	Name change Rer	move manage	er
7. 🗌	form L040. The  CHANGING TO M The filing will be  STATUTORY AGENT  REQUIRED – give the	filing will IEMBER-M rejected i CHANGE name (c	be rejected if it is su ANAGED LLC - comp if it is submitted with - NEW AGENT	nplete and attach the Manager St bmitted without the attachment. Dete and attach the Member Stru- out the attachment.  APPOINTED - see Instructions L	octure Attach	ment form L041.
Statutory Ag Attention (op	(not a P.O. Box) in A agent:		street address	NEW Statutory Age  Attention (optional)  Address 1		
Attention (or	(not a P.O. Box) in A agent: gent Name (required)		street address	Attention (optional)  Address 1		
Address 1  Address 2 (or	(not a P.O. Box) in A agent: gent Name (required)	rizona of I	the NEW statutory	Attention (optional)  Address 1  Address 2 (optional)	nt (can be a	P.O. Box):
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				usinges address the	same as the stre	et address of the statutory agent?
9.	.1 Ist	he NEW Arizo	ona known place of b	usiness address the	some as the stre	at dual coo of the otatator, agont
		Yes – go	to number 10 and co	ntinue		
		No - go 1	to number 9.2 and co	ntinue		
0	n If u	ou answered	"No" to number 0.1	give the <b>NEW phys</b>	ical or street a	ddress (not a P.O. Box) of the known
9.			s of the LLC in Arizon		icai oi street a	duress (not a r.o. box) of the known
	•			· · · · · · · · · · · · · · · · · · ·		
		}				
		Attention (opt	ional)			•
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		City		₹	State or Province	Zip
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	میرم ٦	ATTON CHAI	NGE – check one to	indicate the <b>NEW</b> (	uration or life ne	priod of the LLC:
· _	_ טטע	,	NGE - CHECK OHE IC	, indicate the <b>INEW</b> C	diadon of the pe	sion of the LEC.
	<u></u>	Perpetual				
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		The HC's I		an the economics of	this account:	
	L	] """	ife period will end up	on the occurrence of	uns event:	
. [	ENT	ITY TYPE C Changing t	<b>HANGE</b> – if changin to a PROFESSIONAL L	g entity type, check LC – number 12 mu	one and follow in	eted.
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Expedited processing - add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.

602-542-4100

1300 W. Washington St., Phoenix, Arizona 85007 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.