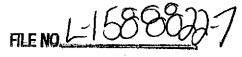
# AZ CORPORATION COMMISSION FILED

AZ CORPORATION COMMISSION FILED

AZ Corp. Commission
05394660

FEB 2 9 2016

DEC 2 9 2015



FILE NO. 15888887

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	e LLC as curre	ently sho	own in A.C.C. re	cords:				
	Korrupt Kustoms L.L.C.								
2.	A.C.C. FILE NUMBER: L15888227  Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations								
	ring the A.C.C. file number on the upper corner of				:p://www.az	cc.gov/Divisions	/Corporations		
	ECK THE BOX NEXT TO EACH CHA MPLETE THE REQUESTED INFORI				ī.				
3.	ENTITY NAME CHANGE – type or pri	nt the exact N	NEW nar	ne of the LLC in	the space	below:			
4.	MEMBERS CHANGE (CHANGE IN ME CURRENTLY SHOWN IN A.C.C. RECORDS - li information for that member (new name and that member. FOR NEW MEMBERS - in a se the appropriate box. If more space is needed	st the name of d/or address), t eparate block,	each mei hen checl . list the r	nber being change call boxes that ap lame in the NEW N	ed, and belo ply to indica Name blank	w that provide a te the change b and give the add	ny new eing made for Iress, and check		
			<u></u>		<del></del>				
Name	currently shown in ACC records		Name cui	rently shown in ACC	recoras				
NEW	Name		NEW Name						
Address 1									
	***		a didusca i	(antinual)		,			
Addre	ess 2 (optional)		Address A	2 (optional)					
City	State or Province	Zip	City		<del></del>	State or Province	Zip		
Count	try		Country		·				
	Address change Add as 20% or more	member	므	ldress change		as 20% or mo			
	Name change Add as less than 20%	6 member	∐ Na	ime change		as less than 2	0% member		
	Remove member				Kem	ove member			
Name	currently shown in ACC records		Name cu	rently shown in ACC	records				
NEW	Name		NEW Nar	ne		<u>,</u>			
Addre	255 1		Address	L					
Addre	ess 2 (optional)		Address	2 (optional)					
City	State or Province	Zìp	City	117001100		State or Province	Zip		
Coun			Country						
	Address change	member		idress change	Add	as 20% or mo	re member		
	Name change Add as less than 20%			ime change	Add	as less than 2	0% member		
	Remove member				Rem	ove member			

	<del></del>	<del></del>		
			-	
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IN A.C.C. RECORDS - list the name of each manager being changed, and below that provide any new information for that manager (new name and/or address), then check all boxes that apply to indicate the change being made for that manager. FOR NEW MANAGERS - 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 Managers form L043. Michael Williams Kathy Williams Name currently shown in ACC records Name currently shown in ACC records NEW Name 52774 E. U.S. Hwy. 60 Sp.33 52744 E. U.S. Hwy, 60 Sp. 33 Address 1 Address 1 Address 2 (optional) Address 2 (optional) 85539 Αz Az 85539 Miami Miami State or City State or City UNITED STATES UNITED STATES Country Country Address change Address change Add as manager Add as manager Name change Remove manager Name change Remove manager MANAGEMENT STRUCTURE CHANGE - see Instructions L015i - check only one box below and follow 6. CHANGING TO MANAGER-MANAGED LLC - complete and attach the Manager Structure Attachment form L040. The filing will be rejected if it is submitted without the attachment. CHANGING TO MEMBER-MANAGED LLC - complete and attach the Member Structure Attachment form L041. The filing will be rejected if it is submitted without the attachment. STATUTORY AGENT CHANGE - NEW AGENT APPOINTED - see Instructions L015i: 7. REQUIRED - give the name (can be an individual 7.2 OPTIONAL - mailing address in Arizona of or an entity) and physical or street address NEW Statutory Agent (can be a P.O. Box): (not a P.O. Box) in Arizona of the NEW statutory agent: Statutory Agent Name (required) Attention (optional) Attention (optional) Address 1 Address 2 (optional) Address 2 (optional) State City REQUIRED - the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment. STATUTORY AGENT ADDRESS CHANGE - ADDRESS OF CURRENT STATUTORY AGENT - complete 8.1 and/or 8.2: NEW mailing address in Arizona of the existing NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent (can be a P.O. Box): statutory agent: Monty Williams Attention (optional) Attention (optional) P.O. Box 1923 Address 1 Address 1 Address 2 (optional) Address 2(optional) 85173 Az city Superior Zip State Zip State City

MANAGERS CHANGE (CHANGE IN MANAGERS) - Use one block per person - FOR MANAGERS CURRENTLY SHOWN

5.

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	tha NEIM Arizana kaassa alaaa af basa'a	acc address the same at the	
9.1 15	_		e street address of the statutory agent?
Ļ	Yes - go to number 10 and contin		
L	No − go to number 9.2 and continuous	nue	
	you answered "No" to number 9.1, give ce of business of the LLC in Arizona:	e the <b>NEW physical or stre</b>	eet address (not a P.O. Box) of the known
	Attention (optional)		
	Address 1		
	Address 2 (optional)		
	City	State of	or Zip
	Country	Province	ce
. 🗌 DUR	ATION CHANGE - check one to inc	licate the <b>NEW</b> duration or li	ife period of the LLC:
	Perpetual		
	The LLC's life period will end on this	date:	(enter a date – mm/dd/yy)
Г	The LLC's life period will end upon t	he occurrence of this <b>event</b>	:
_	_		(describe an event
.   EN1	ITTY TYPE CHANGE - if changing en  Changing to a PROFESSIONAL LLC -  Changing to a NON-PROFESSIONAL	- number 12 must also be co	ompleted.
	Changing to a PROFESSIONAL LLC - Changing to a NON-PROFESSIONAL	– number 12 must also be co LLC (professional LLC becon	ompleted.
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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.

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HI,

WE ARE RYMOUND 3 OF THE MANAGES 4 LEAUND MONTY WILLIAMS AS MANAGER + DAND STATORY ACFUT.

ON OUR PAPER WORL IT HAS THE FILE NUMBER

AS L-158832-7 OR L 1588227 WITHOUT

THE DASH.

THANK YOU AND HAVE A GREAT DAY

MIKE WILLIAMS

HONE: 928-473-6210

CELC: 928-701-3110

COMPANY MALING ADDRESS:

P.O. Box 1923 SUPGRION, AZ 85173

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AZ CORPORATION COMMISSION FILED

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FEB 2 9 2016





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				<b>FICLES C</b> Read the In		ENDMENT ons <u>L015i</u>			
1.	1. ENTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records:								
	Korrupt-Kustoms L.L.C.								
2.	A.C.C. FILE NUM Find the A.C.C. file	4BER: L-15	88227	filed document	ts OP on O	ir wehsite at: http	3://www.azr	rc.gov/Divisions	/Corporations
							J.// WWW.020	.c.gov) bivisions	r Sovie Grand Control of Control
	ECK THE BOX MPLETE THE I								
3.	ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:								
4.	MEMBERS CHANGE (CHANGE IN MEMBERS) — see <u>Instructions L015!</u> — 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 <u>Amendment Attachment for Members form L044</u> .								
							<u> </u>		
Nam	e currently shown in ACC	records			Name cum	ently shown in ACC :	records		
NEW Name				NEW Name					
Addr	Address 1				Address 1				
Addr	ess 2 (optional)				Address 2	(optional)			Zip
City			State or Province	Zip	City	· · · · · · · · · · · · · · · · · · ·		State or Province	ZΨ
Cour	ntry				Country	<u> </u>		Production	
	Address change		20% or more	-		iress change		as 20% or mo	
	Name change		less than 20° re member	% member	L  Nai	me change	=	as less than 2 ove member	u% member
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Nam	e currently shown in ACC	records			Name currently shown in ACC records				
NEW	Name				NEW Nam	e			
Addi	ress 1	······································			Address 1				
Add	ress 2 (optional)				Address 2	(optional)	<del></del>		
City			State or Province	Zlip	City			State or Province	Žip
Cou	Address change	□ bbA □	s 20% or mon	e member	Country	dress change	☐ Add	as 20% or mo	ore member
	Name change	=	s less than 20		☐ Na	me change	Add	as less than 2	0% member
	_	Remo	ve member				Rem	ove member	

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IM A.C.C. RECORDS that manager (new FOR NEW MANAGER	- list the name name and/or ad S ~ <b>in a separ</b> :	of each manager being idress), then check all ate block, list the name.	) — Use one block per person - FOR M g changed, and below that provide any n boxes that apply to indicate the change I ne in the NEW Name blank and give the a attach the <u>Amendment Attachment for</u> M	ew informat ceing made address, and	ion for for that manager, chack the
Mike Williams			77 41 137 11		<del></del>
Name currently shown in ACC record			Kathy Williams		
			The correctly shown in the rection		
NEW Name			NEW Name		
51344 N. Hutton Peak Rd.			51344 N. Hutton Peak Rd.		
Address 1			Address 1		
Address 2 (optional)					
Miami	Az	85539	Address 2 (optional) Miami	Az	85539
Cità	State o		City	State or	Zip
UNITED STATE	S Provinc	be .	UNITED STATES	Province	<b></b>
Country			Country		
Address change	Add as manag	ger	Address change Add a	is manage	г
■ Name change	Remove mana	ager	Name change	ve manag	er
7. STATUTORY AGE	NT CHANGE	if it is submitted with	iplete and attach the Member Struct hout the attachment.  APPOINTED - see Instructions LO.	1 <i>5i</i> :	
or an entity) and	physical or	an be an individual  street address the NEW statutory	7.2 OPTIONAL - mailing a NEW Statutory Agent		
Statutory Agent Name (required)					
Attention (optional)	·		Attention (optional)		
Address 1			Address 1	·	
Address 2 (optional)		1	Address 2 (optional)	1	
City	State	Zip	City	State	2ip
<del></del>	Statutory Age	nt Acceptance form	M002 must be submitted along with		<u> </u>
8. STATUTORY AGE and/or 8.2:	NT ADDRES	S CHANGE - ADDR	LESS OF CURRENT STATUTORY A	GENT - co	omplete 8.1
8.1 NEW physical or (not a P. O. Box) statutory agent:			8.2 NEW mailing addre statutory agent (can		
Attention (optional)	-		Attention (optional)		
Address 1			Address 1	············	· · · · · · · · · · · · · · · · · · ·
Address 2(optional)	<del>-</del>		Address 2 (optional)	T	<u> </u>
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9.1	to the							
	to the	NEW ARZ	ona known piac	ce of business a	address the s	me as the street	t address of the	statutory agent?
	1	Yes - go	to number 10 a	and continue				
		No - go	to number 9.2	and continue				
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	L	Country				Province		
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	7	Perpetual						
	اوبسا	•	life netiod will e	end on this dat	a:	(en	ter a date ~ mm	/dd/w/)
			life period will a					,, , , ,
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GNATE	PROFI rende OTHE you n	R AMENDA nust attack By check together	MENT - if an an an at to these Articles with any attack	amendment wa les of Amendme arked "I accept thments is subn	ribe the NEV  as made that ent a complet  below, I ack mitted in comp  I ACCE  I CUA-SC  Printed Name	was not addresse e copy of the LLC nowledge under pliance with Arizo	ional services the dot by the check is C's written amen penalty of perjuina law.	ooxes on this form, ther dment.
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to the individual needs of your business.

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If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

FEB 2 9 2016

ARIZONA GORI: COMMISSION CORPORATIONS DIVISION

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### **ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION**

## **COVER SHEET**

### **USE A SEPARATE COVER SHEET FOR EACH DOCUMENT**

1. WHAT A	RE YOU FILING?		
New Entity		ection	
2. ENTITY	NAME:		
Korrupt Kusto	ms L.L.C.		
3. CALCUL	TE YOUR FEES (copies, certificate of good standing and expedited	processing are all option	al):
Document fili	ng fee (fees are listed on the bottom of the form or on the fee schedu	ule) Subtotal:	\$25.00
		dd \$35.00 Subtotal:	\$35.00
Corporation	n certified copies \$ 5.00 each x (enter number of copies r	equested) Subtotal:	
LLC certific	ed copies \$10.00 each x 2 (enter number of copies r	equested) Subtotal:	\$20.00
Certificate	of Good Standing \$10.00 each x (enter number of copies r	equested) Subtotal:	
TOTAL YOUR A	4OUNT OWED 7	OTAL AMOUNT DUE:	\$80.00
handwritten or s Credit cards - online certificate	inted or preprinted name and address of the account holder; no imprinted stamped names, addresses, or check numbers; temporary checks (new a may be used for in-person submittals, and for online corporation annual as of good standing. We accept only Visa, MasterCard, and American Expenses of Return Delivery Option (PLEASE PRINT CLEAR	ccounts). reports, online name res ress.	ervations, or
Email		LI and Select only	JIVL).
Pick up	Email address:	N	
<del>-</del>	Name: Michael Williams	thone:	
✓ Mail	Address: P.O. Box 1923		·····
	City: Superior State: Az	Zip: 851	73
	Phone: 928-701-3110	Ζίμ: Ο Ο Ι	.,,
DOCUMENTS	WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANN	IER (APPROXIMATELY	ONE WEEK)
PICK-UP 8	FOR ARIZONA CORPORATION COMMISSION USE O		

View current processing times at: <a href="www.azcc.gov/Divisions/Corporations/document-processing-times.pdf">www.azcc.gov/Divisions/Corporations/document-processing-times.pdf</a>

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### RECEIVED

DEC 2 9 2015

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ARIZONA GORE: COMMISSION
ARIZONA CORE: COMMISSION
CORPORATIONS DIVISION

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

### **ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION**

### **COVER SHEET**

### **USE A SEPARATE COVER SHEET FOR EACH DOCUMENT**

1. WHAT A	RE YOU FILING?						
☐ New Entity	Change to ex	xisting entity	/ DI	Re-submiss	on/Correction		
_	_		_				
2. ENTITY	NAME:						
Korrupt -Kuste	oms L.L.C.						
3. CALCULA	3. CALCULATE YOUR FEES (copies, certificate of good standing and expedited processing are all optional):						
Document filir	ng fee (fees are listed o	on the bottom o	f the form	n or on the <u>fe</u>	e schedule)	Subtotal:	25100
	XPEDITED process			]40	If YES, add \$35.00	Subtotal:	\$35.00
		\$ 5.00 each x	((	enter number	of copies requested)	Subtotal:	
LLC certifie		\$10.00 each x	2 (	enter number	of copies requested)	Subtotal:	\$20.00
☐ Certificate	of Good Standing	\$10.00 each x	(6	enter number	of copies requested)	Subtotal:	
TOTAL YOUR AN	IOUNT OWED				TOTAL AM	SUNT DUE:	\$55.00
•						,	
4. PAYMEN	T METHOD:						<b>200</b>
MOD Acco				- Landida la			
Checks or mon	ail cash. Cash may be u <b>ey orders</b> - must be m	ade payable to	"Arizona	Corporation Co	ommission," with all 1	words spelled	out and no
abbreviations, C	hecks must be complete inted or preprinted nam	elv and property	filled out	t, including the	: amount sections. Ul	NACCEPTABLI	E CHECKS
handwritten or s	tamped names, address	es, or check nu	ımbers: b	emporary che	ks (new accounts).		
Credit cards - i	may be used for in-persons of good standing. We	on submittals, a	and for on a. Master	iline corporation	on annual reports, on erican Express.	line name re:	servations, or
Offine Certificace	S Of GOOD Staffding. 110	OCCUPATION TO	G, FROSCET	COVER CHE PAIN	THOSE EXP. COST.		
5. REQUIRE	D - RETURN DELI	IVERY OPTI	ON (PL	EASE PRIN	<u>T CLEARLY</u> and s	elect only	ONE):
☐ Email	Email address:						
Pick up	Name:				Phone:		
✓ Mail	Name: Michael Willia	ams					
	Address: P.O. Box 592	2					
	ov: Miami			State: A	!	Zip: 85	539
	Phone: 928-473-82	210					
DOCUMENTS \	DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)						
	POR A	RIZONA CORP	ORATIO	N COMMISSI	ON USE ONLY		
PICK-UP E	Y:				DATE:		
PICK-UP	Y:				UATE:		

View current processing times at: <a href="www.azcc.gov/Divisions/Corporations/document-processing-times.pdf">www.azcc.gov/Divisions/Corporations/document-processing-times.pdf</a>

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COMMISSIONERS
SUSAN BITTER SMITH - Chairman
BOB STUMP
BOB BURNS
DOUG LITTLE
TOM FORESE



JODI JERICH Executive Director

PATRICIA L. BARFIELD Director Corporations Division

#### ARIZONA CORPORATION COMMISSION

### RECEIVED

KORRUPT-KUSTOMS L.L.C. 52744 E US HWY 60 SP 33

FEB 2 9 2016

MIAMI, AZ 85539

ARIZONA CORE COMMISSION

CORFORATIONS DIVISION Fective Date: 01/05/2016
File No: L-1588822-7

We have received a document submission for the above-referenced entity. If an acceptable form of payment for the correct filing fee was received, it has been deposited and is nonrefundable pursuant to statute, unless otherwise noted below. The document is REJECTED and being returned for the following reasons:

The incorrect fee amount was enclosed. Please return with correct fee. The filing fee is \$25.00 and expedited service fee is available for an additional \$35.00. Please make checks payable to "Arizona Corporation Commission" and do not use the abbreviation "ACC" on the check.

The check # 5061 for \$55.00 is being returned/attached. The address of both managers listed in art. 5 is not consistent with our record. Please, remove wrong address or provide the correct address consistent with our record. Check off the "manager managed" box on page 3.

#### IMPORTANT INFORMATION:

Follow the instructions below to resubmit your document. If you originally paid for expedited processing, the resubmitted document will be processed within the current posted expedited time frame after we receive the resubmission, and no additional fees are owed. If you originally paid for regular processing time, the resubmitted document will be processed within the current posted regular time frame after we receive the resubmission, and no additional fees are owed. If you want to upgrade from regular processing to expedited processing, then you can pay the \$35.00 expedite fee when you resubmit the document.

Please Note: Limited Liability Companies must return the corrected document within thirty (30) calendar days of the rejection date to retain the original file date.

Return the following information to the Corporations Division:

- 1. A copy of this letter and all pages of the rejected document.
- 2. The corrected document, NEW Cover Sheet, plus any additional

Andrew A

paperwork or filing fees, as requested within this letter.

If you do not owe any additional fees or are paying by MOD account you can email your resubmission packet as a pdf document attachment to documentintake@azcc.gov.

If you have any questions, please feel free to contact the Customer Service Call Center at 602-542-3026, or Arizona residents only may use the toll free number 800-345-5819.

TO SUBSCRIBE TO THE ANNUAL REPORT EMAIL REMINDER SERVICE, GO ONLINE TO http://ecorp.azcc.gov. USE THE SERVICE FEATURE AND SELECT "SUBSCRIBE TO EMAIL REMINDER TO FILE ANNUAL REPORT." YOU CAN ALSO SUBSCRIBE USING THE SEARCH FEATURE TO FIND YOUR CORPORATION'S RECORD, THEN CLICK ON THE BUTTON FOR "ANNUAL REPORT EMAIL REMINDERS." IF YOU CHOOSE NOT TO SUBSCRIBE, YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

Tell us how we are doing. Take the online customer service survey at www.azcc.gov/divisions/Corporations.

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