AZ CORPORATION COMMISSION
FILED

DEC 2 0 2016

FILE NO. L19155716

AZ Corp. Commission
05768303

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

ARTICLES OF AMENDMENT

Read the Instructions L015

1. **ENTITY NAME** – give the exact name of the LLC as currently shown in A.C.C. records:

White House Creative LLC

2. **A.C.C. FILE NUMBER:** L-19155716
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

CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.

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 Instructions L015* – **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.

Gayle L Davis Name currently shown in ACC records	
Jacqueline N. Davis NEW Name	Name currently shown in ACC records NEW Name
PO Box 12120 Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
Chandler / AZ / 85248 City / State or Province / Zip	City / State or Province / Zip
UNITED STATES Country	Country
☐ Address change ☑ Add as 20% or more member ☐ Name change ☐ Add as less than 20% member ☐ Remove member	☐ 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 Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / State or Province / Zip	City / State or Province / Zip
Country	Country
☐ Address change ☐ Add as 20% or more member ☐ Name change ☐ Add as less than 20% member ☐ Remove member	☐ Address change ☐ Add as 20% or more member ☐ Name change ☐ Add as less than 20% member ☐ Remove member

5. ☐ **MANAGERS CHANGE (CHANGE IN MANAGERS) – Use one block per person –** FOR MANAGERS CURRENTLY SHOWN 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.**

Name currently shown in ACC records	Name currently shown in ACC records
NEW Name	NEW Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / State or Province / Zip	City / State or Province / Zip
Country	Country
☐ Address change ☐ Add as manager ☐ Name change ☐ Remove manager	☐ Address change ☐ Add as manager ☐ Name change ☐ Remove manager

6. ☐ **MANAGEMENT STRUCTURE CHANGE –** *see Instructions L015i* – check only one box below and follow instructions:

☐ 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.*

7. ☐ **STATUTORY AGENT CHANGE – NEW AGENT APPOINTED –** *see Instructions L015i*:

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)
Address 1	Address 1
Address 2 (optional) / City / State / Zip	Address 2 (optional) / City / State / Zip

7.3 *REQUIRED* – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment.

8. ☐ **STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT –** complete 8.1 and/or 8.2:

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
Address 2(optional) / City / State / Zip	Address 2 (optional) / City / State / Zip

9. ☐ **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 **NEW physical or street address** (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 Province	Zip
Country			

10. ☐ **DURATION CHANGE** – check one to indicate the **NEW** duration or life period of the LLC:

☐ Perpetual

☐ The LLC's life period will end on this **date**: _____ (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. ☐ **PROFESSIONAL SERVICES CHANGE –** describe the **NEW** 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.

SIGNATURE: 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.

☑ I ACCEPT

Signature | Printed Name | Date (mm/dd/yy)

REQUIRED – check only one and fill in the corresponding blank if signing for an entity:

☐ This is a **manager-managed LLC** and I am signing individually as a **manager or** I am signing for an **entity manager named**:	☐ This is a **member-managed LLC** and I am signing individually as a **member or** I am signing for an **entity member named**:

Filing Fee: $25.00 (regular processing) Expedited processing – add $35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 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.

APR-21-2014 MON 12:43 PM The Insurance Place FAX NO. 480 AZ CORP. Commission

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AZ CORPORATION COMMISSION
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APR 21 2014

FILE NO. L-19155316 FILE NO. L-19155316

ARTICLES OF ORGANIZATION

Read the Instructions LLC1

1. **ENTITY TYPE** – check only one to indicate the type of entity being formed:

☑ DOMESTIC LIMITED LIABILITY COMPANY (Only name must contain the word "Limited Liability Company" or "LLC")

☐ PROFESSIONAL LIMITED LIABILITY COMPANY (Must contain words "Professional Limited Liability Company" or "PLLC")

2. **ENTITY NAME** – see instructions LLC1 for full naming requirements – give the exact name of the LLC

White Haven Country LLC

3. **PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES** – if and only if professional LLC is chosen in number 1 above, describe the professional services that the professional LLC will provide (examples: law firm, accounting, medical):

4. **STATUTORY AGENT** for service of process – see instructions LLC2

4.1 AGENT - give the name (can be an Arizona resident or an Arizona-registered entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent.	4.2 (OPTIONAL – mailing address in Arizona of Statutory Agent (can be a P.O. Box):
Charlie Davis	
400 W. Chandler Blvd	
Chandler AZ 85225	AZ

4.3 ACCEPTANCE – the Statutory Agent Acceptance Form LLC2 must be submitted along with these Articles of Organization.

5. **ARIZONA (OR MAIN) PLACE OF BUSINESS ADDRESS**

5.1 Is the Arizona known place of business address the same as the street address of the statutory agent? ☑ Yes – go to number 6 and continue
☐ No – go to number 5.2 and continue

5.2 If you answered "No" to number 5.1, give the physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

AZ
U.S.A.

6. DURATION – If the duration of the period of the LLC is perpetual (forever), then skip this section and continue to number 7 or number 8. Otherwise, check only one box below and fill in the corresponding blank:

☐ The LLC's life period will end on the date _____ (specific date)

☑ The LLC's life period will end upon the occurrence of this event: (example: an event)

In the event my grandchild graduates

COMPLETE NUMBER 7 OR NUMBER 8 – NOT BOTH.

7. MANAGER-MANAGED LLC – see instructions (LL10) – check this box ☑ if management of the LLC will be vested in a manager or managers (meaning one or more managers will run the company) and complete and attach ONLY the Manager Structure Attachment form (LL10). (Each manager and manager will be listed on the Manager Structure Attachment.) This filing will be rejected if it is submitted without the attachment.

8. MEMBER-MANAGED LLC – see instructions (LL10) – check this box ☐ if management of the LLC will be reserved to the members (meaning all members will run the company together if there is no operating agreement stating otherwise) and complete and attach ONLY the Member Structure Attachment form (LL11). (All members will be listed on the Member Structure Attachment.) This filing will be rejected if it is submitted without the attachment.

9. ORGANIZER and SIGNATURE – the individual or pre-existing entity submitting this document is the Organizer – list the name of the Organizer below. If the Organizer is an individual, that individual must sign below. If the Organizer is a pre-existing entity, provide the signature of the individual acting for that entity, then print the individual's name.

The person signing below declares and verifies under penalty of perjury that the information contained within this document, together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Organizer:

[signature] 3/24/2014

Date

Signature

Emily Davis

Printed Name (if different from Organizer)

Filing Fee: $50.00 (regular processing) Expedited processing – add $100.00 to filing fee. All forms and attachments – see instructions.	Mail: Arizona Corporation Commission Corporation Filing Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-3100

APR-21-2014 MON 12:42 PM The Insurance Place FAX NO. 4808880045 P. 01/08

[illegible]

STATUTORY AGENT ACCEPTANCE

Please read Instructions [illegible]

1. ENTITY NAME – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):

   White House Creating LLC

2. A.C.C. FILE NUMBER (if entity is already incorporated or registered in AZ): N-1905482-1
   [illegible]

3. STATUTORY AGENT NAME – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be either an individual or an entity). NOTE - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

   Gayle Davis

STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 3 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

[signature] Gayle Davis 3/26/2014

Signature Printed Name Date

REQUIRED – check only one:

[X] Individual as statutory agent: I am signing on behalf of myself as the individual	[ ] Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.

Filing fee: none (regular processing) Expedited processing – (available only if this form is submitted by itself) add $35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: [illegible]

[illegible]

[illegible]

MANAGER STRUCTURE ATTACHMENT

1. ENTITY NAME – give the exact name of the LLC (Foreign LLCs – give name in domicile state or country):
   Valle Verde Condos LLC
2. A.O.C. FILE NUMBER (if known): [redacted]
3. MANAGERS / MEMBERS – give the name and address of each and every manager and the all members who own 20% or more of the profits or capital of the LLC. Also one block per person. Members who own less than 20% may also be listed, but it is not required. Check the appropriate box or boxes below each person listed – do not check both manager boxes. If more space is needed, use another Manager/ Structure Attachment form.

Gayle Davis	Carrie Flinn
PO Box 13120	7226 S. Canal Ave
Chandler AZ 85248	Mesa AZ 85204
UNITED STATES	UNITED STATES
☐ Manager ☐ 20% or more member ☐ Less than 20% member	☐ Manager ☐ 20% or more member ☐ Less than 20% member
☐ Manager ☐ 20% or more member ☐ Less than 20% member	☐ Manager ☐ 20% or more member ☐ Less than 20% member
☐ Manager ☐ 20% or more member ☐ Less than 20% member	☐ Manager ☐ 20% or more member ☐ Less than 20% member

ARIZONA CORP COMMISSION
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FILE NO L-19155716

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

ARTICLES OF AMENDMENT

Read the Instructions L015i

1. ENTITY NAME – give the exact name of the LLC as currently shown in A.C.C. records:

   WHITE HOUSE CREATIVE, LLC

2. A.C.C. FILE NUMBER: L19155716

   Find the A.C.C. file number on the upper corner of filed documents OR on our website at: [illegible]

CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.

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 Instructions L015i* – [illegible]

CARRIE FLINN Name currently shown in ACC records	Name currently shown in ACC records
New Name	New Name
2226 E. CAROL AVE. Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
MESA, AZ 85204 City / State or Province / Zip	City / State or Province / Zip
UNITED STATES Country	Country
☐ Address change ☐ Name change ☐ Add as 20% or more member ☐ Add as less than 20% member ☑ Remove member	☐ Address change ☐ Name change ☐ Add as 20% or more member ☐ Add as less than 20% member ☐ Remove member
Name currently shown in ACC records	Name currently shown in ACC records
New Name	New Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / State or Province / Zip	City / State or Province / Zip
Country	Country
☐ Address change ☐ Name change ☐ Add as 20% or more member ☐ Add as less than 20% member ☐ Remove member	☐ Address change ☐ Name change ☐ Add as 20% or more member ☐ Add as less than 20% member ☐ Remove member

5. ☐ **MANAGERS CHANGE (CHANGES IN MANAGERS)** – [illegible] – FOR MANAGERS CURRENTLY SHOWN IN A.C.C. RECORDS – [illegible] any new information for this manager [illegible]. FOR NEW MANAGERS – [illegible] appropriate box. If more space is needed, complete and attach the [illegible] for Managers form L048.

Name currently shown in A.C.C. records	Name currently shown in A.C.C. records
New Name	New Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / State or Province / Zip	City / State or Province / Zip
Country	Country
☐ Address change ☐ Add as manager ☐ Name change ☐ Remove manager	☐ Address change ☐ Add as manager ☐ Name change ☐ Remove manager

6. ☐ **MANAGEMENT STRUCTURE CHANGE** – see Instructions [illegible] – check only one box below and follow instructions:

☐ CHANGING TO MANAGER-MANAGED LLC – complete and attach the [illegible] Structure Attachment form [illegible]. *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.*

7. ☐ **STATUTORY AGENT CHANGE – NEW AGENT APPOINTED** – see Instructions [illegible]	
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)
Address 1	Address 1
Address 2 (optional) City / State / Zip	Address 2 (optional) City / State / Zip
7.3 REQUIRED – the [illegible] Agent Acceptance form [illegible] must be submitted along with these Articles of Amendment.	

8. ☐ **STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT** – complete 8.1 and/or 8.2:	
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
Address 2 (optional) City / State / Zip	Address 2 (optional) City / State / Zip

9. ☐ 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 NEW physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)
Address 1
Address 2 (optional)
City / Country / State or Province / Zip

10. ☐ DURATION CHANGE – check one to indicate the NEW duration or life period of the LLC:

☐ Perpetual

☐ The LLC's life period will end on this date: ____________ (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. ☐ PROFESSIONAL SERVICES CHANGE – describe the NEW 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.

SIGNATURE: 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.

☒ I ACCEPT

[signature] Gayle L Davis 1-12-2016

Signature / Printed Name / Date (mm/dd/yy)

REQUIRED – check only one and fill in the corresponding blank if signing for an entity:

☒ This is a manager-managed LLC and I am signing individually as a manager or I am signing for an entity manager named:	☐ This is a member-managed LLC and I am signing individually as a member or I am signing for an entity member named:

Filing Fee: $25.00 (regular processing) Expedited processing – add $35.00 to filing fee. All fees are nonrefundable – see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100

[illegible]

[illegible]

[illegible] Arizona Corporation Commission – Corporations Division [illegible]