AZ CORPORATION COMMISSION FILED

ARIZONA CORP COMMISSION FILED



MAY 23 2017

FILE NO! <u>- 1283934</u>6

MAY **30** 2017 FILE NO. <u>- 1283834-6</u>

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

ARTICLES OF AMENDMENT

	Read the Instructions L015i										
1.	ENT	NTITY NAME - give the exact name of the LLC as currently shown in A.C.C. records:									
	Wai	Wangren Conduit Investments, LLC									
2.											
٠.,		the A.C.C. file number on the					p://www.a	azcc.gov/Divisions	s/Corporations		
		THE BOX NEXT TO ETE THE REQUESTE									
3.		ENTITY NAME CHANGE – type or print the exact NEW name of the LLC in the space below:									
4.	2	MEMBERS CHANGE (CHANGE IN MEMBERS) – see Instructions L015i – Use one block per person - To REMOVE a member - list the name only of the member being removed and check "Remove member." To ADD a member - list the name and address of the member being added and check "Add member." To CHANGE ADDRESS only - list the name and NEW address and check "Address change." To CHANGE NAME of existing member - list the current name, then the NEW name, and check "Name change." If more space is needed, complete and attach the Amendment Attachment for Member form L044.							ber." er."		
Wai	ngren	Roth Fund, LLC									
Name	e currer	ntly shown in ACC records	Manufacture on the control of the co	Mad Mad ben'ny kaominina dia mandrina dia mangana manasa ny mandrina dia mandrina dia mandrina dia mandrina di	Name currently shown in ACC records						
	Name				NEW Name						
658		Kimberlee Way			Address 1						
	ess 2 (o indler	optional) r	AZ	85248	Addre	ess 2 (optional)					
City	UNITED STATES State or Province				City			State or Province	Zip		
Coun					Count	try		4			
	Address change Add member					Address change Add member					
	Name change					☐ Name change ☐ Remove member					
		,									
Name currently shown in ACC records					Name currently shown in ACC records						
NEW Name					NEW Name						
Address 1					Address 1						
Addr	ess 2 (o	optional)			Addre	ess 2 (optional)					
City		<u> </u>	State or Province	Zip	City			State or Province	Zip		
Cour					Count	•		d			
님	Address change					Address change	=	d member			
Name change Remove member				Name change Remove member							

MANAGERS CHANG TO REMOVE a manager To ADD a manager - To CHANGE ADDRESS TO CHANGE NAME of If more space is need	er - list the list the na only - lis existing m	e name only of the ame and address of t the name and N nanager - list the o	e mana of the r EW add current	ger being removed a manager being added dress and check "Add name, then the NEV	and check "I d and check dress chang W name, and	: "Add mar e." d check "N	nager."	
Name currently shown in ACC records			Nar	ne currently shown in ACC	records			
NEW Name			NEV	V Name	***************************************	~~~~~~		
Address 1			Add	Address 1				
Address 2 (optional)	Add	Address 2 (optional)						
City	State of Province		City			State or Province	Zip	
	manager nove mana		Cou	Country Address change Add manager Name change Remove manager				
form L040. The	ns will be 1ANAGER- filing will 1EMBER-N	listed on the appr MANAGED LLC – of be rejected if it is	opriate comple submi omplete	e Attachment form. Ite and attach the Mitted without the attack and attach the Mer	anager Stru	cture Atta	chment	
7. STATUTORY AGENT								
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)			Ati	Attention (optional)				
Address 1	Ad	Address 1						
Address 2 (optional)	Γ		Ad	dress 2 (optional)				
City	State	Zip	Cit			State	Zip	
7.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment.							icles of	
8. STATUTORY AGENT and/or 8.2:	ADDRES	S CHANGE - ADI	ORESS	OF CURRENT STA	TUTORY A	GENT - co	omplete 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):				
Attention (optional)	Att	Attention (optional)						
Address 1				Address 1				
Address 2(optional)				dress 2 (optional)				
City	State	Zip	Cit	у		State	Zip	

9. 🗀	ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:								
9.1	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	2 If y	ou answered te of busines:	"No" to number 9.	1, give the N ona:	EW ph	ysica	or street add	dress (not a P.O. Box) of the known	
				****					\neg
		Attention (opt	ional)						
		, machine (ope	J. 10.17						
		Address 1							\dashv
		Address 2 (op	tional)					T	_
		City					State or Province	Zip	\dashv
		Country							
10.	DUB	ATTON CHAI	NGE - check one	to indicate th	oo NEW		tion or life new	ad as the U.S.	
20.			IGE - Check one	to indicate tr	IS MEN	v dura	ation or life pen	od or the LLC:	
		Perpetual	8						
	Ц						•	ter a date - mm/dd/yy)	
		The LLC's I	fe period will end ι	ipon the occu	ırrence	of th	is event :		
								(describe an eve	nt)
11.	FNT	ITY TYPE C	HANGE - if chang	ina entity tyr	oe cha	ck on	and following	tructions	
	닏		o a PROFESSIONAL				,		
		Changing to	o a NON-PROFESSI	ONAL LLC (p	rofessio	onai L	LC becoming a	regular LLC).	
12.	PRO rend		SERVICES CHAN	GE – describ	be the	NEW	type of profess	ional services the professional LLC w	ill
13.	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 Ge Wang 5/14/2017									
		w /	1/6001		_		ı		
			<i></i>		e Wan			5/14/2017	
-	Signature Printed Name Date (mm/dd/yy) REQUIRED – check only one and fill in the corresponding blank if signing for an entity:								
Thi					JIAIIK II				
ind	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:							tity	
G	Ge Wang								
Expedit	ted pro	cessing - ad	ar processing) Id \$35.00 to filing for the see Instructions.		Mail:	13		on Commission - Corporate Filings S ton St., Phoenix, Arizona 85007	ection
Ni iees	are il	on erundable	- see mistractions.	•	Fax:	0(JZ-34Z-41UU		

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.

RECEIVED

MAY 3 0 2017

AHIZONA COMP COMMISSION

CORPORATIONS DIVISION

CORPORATIONS DIVISION

MAY 2 3 2017



ARIZONA CORP. COMMISSION CORPORATIONS DIVISION



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

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

** ORDER COPIES USING A RECORDS REQUEST FORM **

WHAT ARE Y	OU FILING?		
☐ New Entity	Change to existing en	tity Re-submission of	rejected filing
ENTITY NAM	E - give the exact name of the	ne corporation as currently	shown in A.C.C. records:
Wangren Con	duit Investments, LLC		
EXPEDITED I	PROCESSING?		
YES - add :	35 to the filing fee	□NO - pay only the	filing fee
Document fili	ng fees are listed on the bott	om of each form or on the f	ee schedule on our website,
http://ecorp.a	azcc.gov, under the FAQs.		
PAYMENT:			
☐ MOD Acco	ount #: nail cash. Cash may be used only for	Total amount to deduct:	
abbreviations. C include: no impl handwritten or s Credit cards -	thecks must be completely and proprinted or preprinted name and addrestamped names, addresses, or check	erly filled out, including the amous ess of the account holder; no impri k numbers; temporary checks (new ls, and for online corporation annu	v accounts). al reports, online name reservations, or
	RETURN DELIVERY OPTIC		
☑ Email	Email address: gewang2001@gn	nail.com	
☐ Pick up	Name:		Phone:
☐ Mail	Name:		
	Address:		
	City:	State:	Zip:
	Phone:		
DOCUMENTS	ATLL DE MAYLED TE THEY ARE NO	T DICKED HE IN A TIME! V MA	NAMES (ARROYTMATELY ONE WEEK)
DOCUMENTS	WILL DE MAILEN IP INET AKE NO	OI PICKED OF IN A IIMELY MA	NNER (APPROXIMATELY ONE WEEK)
	FOR ARIZONA CO	PRPORATION COMMISSION US	EONLY
,			

View current processing times at: www.azcc.gov/Divisions/Corporations/document-processing-times.pdf

PICK-UP BY:

DATE: