

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: WPF NORTH, LLC
ENTITY ID: L15018633
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES:
CHARACTER OF BUSINESS: Any legal purpose
MANAGEMENT STRUCTURE: Manager-Managed

NEW NAME

No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: WILLIAM M CONWAY
PHYSICAL ADDRESS: 3060 N SWAN RD, TUCSON, AZ 85712
MAILING ADDRESS: 3060 N SWAN RD, TUCSON, AZ 85712

KNOWN PLACE OF BUSINESS

115 WEST BLACK ROAD, HUACHUCA CITY, AZ 85616

PRINCIPALS

Manager: DAWN KAY WALES - 441 51st STREET, MOLINE, IL, 61265, USA - - Date of Taking Office: 03/24/2021

Manager: JAMES W WALES - 115 WEST BLACK ROAD, HUACHUCA CITY, AZ, 85616, USA - - Date of Taking Office: 01/26/2009

Member: JAMES AND DIANA WALES FAMILY TRUST - C/O JAMES W WALES, TRUSTEE, 115 WEST BLACK ROAD, HUACHUCA CITY, AZ, 85616, USA - - Date of Taking Office: 03/24/2021

SIGNATURE

Authorized Agent: William M Conway - 03/30/2021

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:

WPF NORTH, LLC

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

2. ☐ **ENTITY NAME CHANGE** – type or print the exact NEW name of the LLC in the space below:

3. ☒ **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.

<p>1. JAMES W WALES Name currently shown in ACC records</p> <p>NEW Name 2261 N HIGHWAY 90 Address 1</p> <p>Address 2 (optional) HUACHUCA CITY AZ 85616 City State or Province Zip UNITED STATES</p> <p>Country</p> <p><input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member</p>	<p>2. DIANA J WALES Name currently shown in ACC records</p> <p>NEW Name 2261 N HIGHWAY 90 Address 1</p> <p>Address 2 (optional) HUACHUCA CITY AZ 85616 City State or Province Zip UNITED STATES</p> <p>Country</p> <p><input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove member</p>
<p>3. JAMES AND DIANA WALES FAMILY TRUST Name currently shown in ACC records</p> <p>NEW Name C/O JAMES W WALES, TRUSTEE Address 1 115 WEST BLACK ROAD Address 2 (optional) HUACHUCA CITY AZ 85616 City State or Province Zip UNITED STATES</p> <p>Country</p> <p><input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member</p>	<p>4. Name currently shown in ACC records</p> <p>NEW Name</p> <p>Address 1</p> <p>Address 2 (optional)</p> <p>City State or Province Zip</p> <p>Country</p> <p><input type="checkbox"/> Address change <input type="checkbox"/> Add member <input type="checkbox"/> Name change <input type="checkbox"/> Remove member</p>

4. ☒ **MANAGERS CHANGE (CHANGE IN MANAGERS) – Use one block per person –**
 To REMOVE a manager - list the name only of the manager being removed and check "Remove manager."
 To ADD a manager - list the name and address of the manager being added and check "Add manager."
 To CHANGE ADDRESS only - list the name and NEW address and check "Address change."
 To CHANGE NAME of existing manager - list the current name, then the NEW name, and check "Name change."
 If more space is needed, complete and attach the Amendment Attachment for Managers form L043.

1. DIANA J. WALES Name currently shown in ACC records				2. DAWN KAY WALES Name currently shown in ACC records			
NEW Name 2261 N HIGHWAY 90 Address 1				NEW Name 441 51st STREET Address 1			
Address 2 (optional) HUACHUCA CITY City		AZ State or Province	85616 Zip	Address 2 (optional) MOLINE City		IL State or Province	61265 Zip
Country <input type="checkbox"/> Address change <input type="checkbox"/> Add manager <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Remove manager				Country <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Add manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager			

5. ☐ **MANAGEMENT STRUCTURE CHANGE – see Instructions L015i – check only one box below and follow instructions. All persons will be listed on the appropriate Attachment form.**
☐ 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.

6. ☐ **STATUTORY AGENT CHANGE – NEW AGENT APPOINTED – see Instructions L015j:**

6.1 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:			6.2 REQUIRED – mailing address in Arizona of NEW Statutory Agent, if different from street address (can be a P.O. Box): <input type="checkbox"/> Check box if same as street address.		
Statutory Agent Name (required)					
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
6.3 REQUIRED – the <u>Statutory Agent Acceptance form M002</u> must be submitted along with these Articles of Amendment.					

7. ☒ **STATUTORY AGENT ADDRESS CHANGE – ADDRESS OF CURRENT STATUTORY AGENT – complete 7.1 and 7.2:**

7.1 NEW physical or street address (not a P. O. Box) in Arizona of the existing statutory agent:			7.2 NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):		
WILLIAM M CONWAY Attention (optional)			WILLIAM M CONWAY Attention (optional)		
3060 N SWAN ROAD Address 1			3060 N SWAN ROAD Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
TUCSON	AZ	85712	TUCSON	AZ	85712

8. ☒ **PRINCIPAL ADDRESS CHANGE:**

8.1 Is the NEW principal address the same as the street address of the statutory agent?

- ☐ Yes - go to number 9 and continue
- ☒ No - go to number 8.2 and continue

8.2 If you answered "No" to number 8.1, give the **NEW principal address** (can be outside of Arizona and can be a P.O. Box.)

Attention (optional)			
115 WEST BLACK ROAD			
Address 1			
Address 2 (optional)			
HUACHUCA CITY		AZ	85616
City		State or Province	Zip
Country			

9. ☐ **ENTITY TYPE CHANGE** - if changing entity type, check one and follow instructions:

- ☐ Changing to a PROFESSIONAL LLC - number 10 must also be completed.
- ☐ Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).

10. ☐ **PROFESSIONAL SERVICES CHANGE** - describe the **NEW** type of professional services the professional LLC will render:11. ☐ **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 law* that this document together with any attachments is submitted in compliance with Arizona law.

☒ I ACCEPT

James W Wales
Signature

JAMES W WALES
Printed Name

3-24-2011
Date (mm/dd/yy)

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

<input type="checkbox"/> I am an individual authorized to sign this document.	<input checked="" type="checkbox"/> I am signing on behalf of an entity that is authorized to sign this document.
	MANAGER, WPF NORTH, LLC

Expedited or Same Day/Next Day services are available for an additional fee - see Instructions or Cover sheet for prices.

Filing Fee: \$25.00 (regular processing) All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Examination Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
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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.

Clear Form

Print Form

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

AMENDMENT ATTACHMENT FOR MANAGERS

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

2. **Check one box only to indicate what document the Attachment goes with:**

☒ Articles of Amendment ☐ Articles of Amendment to Foreign Registration Statement

3. **MANAGERS CHANGE (CHANGE IN MANAGERS) – Use one block per person -**

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To ADD a manager - list the name and address of the manager being added and check "Add manager."

To CHANGE ADDRESS only - list the name and NEW address and check "Address change."

To CHANGE NAME of existing manager - list the current name, then the NEW name, and check "Name change."

If more space is needed, complete and attach the Amendment Attachment for Managers.

JAMES W WALES					
Name currently shown in ACC records			Name currently shown in ACC records		
NEW Name			NEW Name		
115 WEST BLACK ROAD					
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
HUACHUCA CITY	AZ	85616			
City	State or Province	Zip	City	State or Province	Zip
UNITED STATES					
Country			Country		
<input checked="" type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager			<input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager		
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		
<input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager			<input type="checkbox"/> Address change <input type="checkbox"/> Add as manager <input type="checkbox"/> Name change <input type="checkbox"/> Remove manager		