

Statement of Information (Limited Liability Company)		LLC-12	Secretary State of C	of State		
IMPORTANT — Read instructions before completing this Filing Fee -\$20.00	form.	53	JUN 0 2			
Copy Fees - Face Page \$1.00 & .50 for each attachment pag Certification Fee - \$5.00	e,	\mathcal{A}	1,50 NFIP This Space For O		Only	
Limited Liability Company Name MACHINE ZONE LLC						
2. 12-Digit Secretary of State File Number 3. State or Place of Organization (only if formed outside of CA			f Californi	a)		
201301010047					······································	
4. Business Addresses				Laur	1 7:0-1:	
a. Street Address of Principal Office - Do not list a P.O. Box 2225 E Bayshore Rd, Ste 200		City (no abbreviations) Palo Alto		State CA	2ip Code 94303	
b. Mailing Address of LLC, if different than item 4a City (no abbreviations)			State	Zip Code		
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box		City (no abbreviations)		State CA	Zip Code	
5. Manager(s) or Member(s) If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. Attach additional pages, if necessary.						
a. First Name Victoria		Middle Name	Last Name Valenzuela		Suffix	
b. Address 2225 E Bayshore Rd, Ste 200		City (no abbreviations) Palo Alto		State CA	Zip Code 94303	
6. Agent for Service of Process Item 6a and 6b: If the agent is an individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).						
a. California Agent's First Name (if agent is not a corporation)		Middle Name	Last Name		Suffix	
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box		City (no abbreviations)		State CA	Zip Code	
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete item 6a or 6b Corporation Service Company Which Will Do Business In California As CSC-Lawyers Incorporating Service (1597197						
7. Type of Business						
a. Describe the type of business or services of the Limited Liability Company Mobile gaming technology						
8. Chief Executive Officer, if elected or appointed						
a. First Name		Middle Name	Last Name		Suffix	
b. Address		City (no abbreviations)		State	Zip Code	
9. The Information contained herein, including any attachments, is true and correct.						
5/25/16 Victoria Valenzuela		Manager		4//		
Date Type or Print Name of Person Completing the For		Title	Signature			
Return Address (Optional) (For communication from the Secretary of S	tate relat	ed to this document, or if pu	rchasing a copy of the filed docume	ent enter the	e лате of a	

person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

position and the state of the s					
Name:	Cassie Neill]			
Company:	Corporation Service Company				
Address:	2711 Centerville Road				
City/State/Zip:	Uilmington, DE 19808	J			

5. MANAGERS OR MEMBERS - CONTINUED

201301010047

Ed Lu 2225 E Bayshore Rd, Ste 200, Palo Alto, CA 94303