LLC-1	Articles of Organiza of a Limited Liabilit			
	ited liability company in Calif r filing along with:	ornia, you can fill out this form,		
– A \$70 filin	ng fee.			
	te, non-refundable \$15 servi p off the completed form.	ce fee also must be included,		
	lifornia Franchise Tax Board	o pay a minimum \$800 yearly I. For more information, go to		
	t provide "professional serv Code sections 13401(a) and	ces," as defined by California 13401.3.		
Note: <i>Before submitting the completed form</i> , you she private attorney for advice about your specific busines			This Space	ce For Office Use Only
	For questions about t	nis form, go to <u>www.sos.ca.go</u>	v/business/be/filing-ti	ps.htm.
-	ist the proposed LLC name exact	y as it is to appear on the records of	the California Secretary of	of State.)
①				
Prop		The name must include: LLC, L.L.C., Liability Co. or Ltd. Liability Company; a nc., corporation, or corp., insurer, requirements and restrictions, go to ww	and may not include: bank or insurance company.	, trust, trustee, incorporated, For general entity name
Purpose			, i i i i i i i i i i i i i i i i i i i	
		ompany is to engage in any la ne California Revised Uniform L	-	-
LLC Address	es			
Эа.				СА
Initia	al Street Address of Designated Offi	ce in CA - Do not list a P.O. Box	City (no abbreviations)	State Zip
b Initia	al Mailing Address of LLC, if differer	t from 3a	City (no abbreviations)	State Zip
service of proce	ess in case your LLC is sued. You	t or a California registered corporate may list any adult who lives in Califo ed corporate agent as the address fo	ornia. You may not list a	n LLC as the agent. Do not
④ a				
Age	nt's Name			
b	while Other at Andrewson (if a new tip wat	corporation) - Do not list a P.O. Box	City (no obbyes intigate)	CA
Age	nt's Street Address (If agent is not a	corporation) - Do not list a P.O. Box	City (no abbreviations)	State Zip
Management	(Check only one.)			
S The LLC will be managed by:				
\bigcirc	One Manager 🛛 Mor	e Than One Manager 🛛 🚺 A	All Limited Liability Co	mpany Member(s)
		you need more space, attach extra art of these articles of organization.	pages that are 1-sided a	and on standard letter-sized
•				
Organizer - Si	ign here	Print your name here		_
	-	-		 Drop-Off
Make check/mon Upon filing, we w	ey order payable to: Secretary of ill return one (1) uncertified copy of e, and will certify the copy upon re	State By M. of your filed Secretary of	ail of State 9.0. Box 944228	Drop-Off Secretary of State 1500 11th Street., 3rd Floor Sacramento, CA 95814

Corporations Code §§ 17701.04, 17701.08, 17701.13, 17702.01, Revenue and Taxation Code § 17941

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