

LLC-12A Attachment

A. Limited Liability Company Name (Enter the exact name on file with the California Secretary of State.)

Above Space For Office Use Only

B.	Secretary of State Entity (File) Number	C. State, Foreign Country, or Place of Organization (only if formed ou California)					side of
D.	List of Additional Manager(s) or Member(s) - If the manager/member is an entity, enter the entity's name and add					ldress	s. If the
2a.	First Name – Do not complete Item 2b		Middle Name	Last Name			Suffix
2b.	Entity Name – Do not complete I tem 2a		<u> </u>				<u> </u>
2c.	Address		City (no abbreviations)		State	Zip Code	
За.	First Name – Do not complete Item 3b		Middle Name	Last Name			Suffix
3b.	Entity Name – Do not complete I tem 3a		l	1			<u>I</u>
3c.	Address		City (no abbreviations)		State	Zip Code	
4a.	First Name – Do not complete Item 4b		Middle Name	Last Name			Suffix
4b.	Entity Name – Do not complete I tem 4a		l	1			l
4c.	Address		City (no abbreviations)		State	Zip	Code
5a.	First Name – Do not complete Item 5b		Middle Name	Last Name		I	Suffix
5b.	Entity Name – Do not complete I tem 5a						
5c.	Address		City (no abbreviations)		State	State Zip Code	
6a.	First Name – Do not complete Item 6b		Middle Name	Last Name		I	Suffix
6b.	Entity Name – Do not complete Item 6a						
6c.	Address		City (no abbreviations)		State	Zip	Code
7a.	First Name – Do not complete Item 7b		Middle Name	Last Name	·		Suffix
7b.	Entity Name – Do not complete Item 7a			·			
7c.	Address		City (no abbreviations)		State Zip Code		Code
8a.	First Name – Do not complete Item 8b		Middle Name	Last Name	<u> </u>		Suffix
8b.	Entity Name – Do not complete Item 8a						
8c.	Address		City (no abbreviations)		State	Zip	Code