

Filed Secretary of State State of Washington Date Filed: 07/15/2024 Effective Date: 07/15/2024

UBI #: 603 324 254

Annual Report

BUSINESS INFORMATION

Business Name:

SEATTLE YOUTH HOME SERVICES LLC

UBI Number: **603 324 254**

Business Type:

WA LIMITED LIABILITY COMPANY

Business Status: **ACTIVE**

Principal Office Street Address:

13408 NE 12TH PL, BELLEVUE, WA, 98005-4576, UNITED STATES

Principal Office Mailing Address:

PO BOX 600, BELLEVUE, WA, 98009-0600, UNITED STATES

Expiration Date: **08/31/2025**

Jurisdiction:

UNITED STATES, WASHINGTON

Formation/Registration Date:

08/08/2013

Period of Duration:

PERPETUAL

Inactive Date:

Nature of Business:

PROPERTY MANAGEMENT, REAL ESTATE

REGISTERED AGENT RCW 23.95.410

Registered Agent Name Street Address Mailing Address

SHUONAN YANG 13408 NE 12TH PL, BELLEVUE, WA, 98005-4576, 13408 NE 12TH PL, BELLEVUE, WA, 98005-4576,

UNITED STATES UNITED STATES

PRINCIPAL OFFICE

Phone: **8583374033**

Email:

SHUONAN110902@OUTLOOK.COM

Street Address:

13408 NE 12TH PL, BELLEVUE, WA, 98005-4576, USA

Mailing Address:

PO BOX 600, BELLEVUE, WA, 98009-0600, USA

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GOVERNORS				
Title	Туре	Entity Name	First Name	Last Name
GOVERNOR	INDIVIDUAL		JUN	YANG
NATURE OF BUSINE	ESS			
PROPERTY MREAL ESTATE				
EFFECTIVE DATE				
Effective Date: 07/15/2024				
CONTROLLING INTE	EREST			
- Yes 2. In the past 12 mont - No a. If "Yes", in the p financial interest in the - No 3. If you answered "Ye - No You must submit a Con Failure to report a Cont	s" to question 2a, has a controlling Interest Transfer Return rolling Interest Transfer is subject to Controlling Interest, visit wy	t least 16-2/3 percent of the own transfer of controlling interest ng interest transfer return been form if you answered "yes" to ct to penalty provisions of RCV	onership, stock, or other final (50 percent or greater) of the filed with the Department of questions 1 and 2a.	ne ownership, stock, or other
Attention: Email: Address:				
UPLOAD ADDITIONA	AL DOCUMENTS			
Do you have additional	documents to upload? - No			
EMAIL OPT-IN				
	oox, I hereby opt into receiving a eive paper notifications.	all notifications from the Secre	tary of State for this entity v	ria email only. I acknowledge
AUTHORIZED PERS	ON			
I am an authorized	person.			

Person Type: **INDIVIDUAL**

First Name: SHUONAN
Last Name: YANG
Title: This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.