| Secretary of State | LLC-1 | | | ce Use Only |
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| Articles of Organization Limited Liability Company (LLC) | | | | |
| Limited Liability Company (LLC) | | File No.: 202565612665 Date Filed: 1/28/2025 | | |
| | | L | Bate Filed. 1720/ | 2020 |
| Filing Fee - \$70.00 | | | | |
| Certified Copy Fee (Optional) - \$5.00 | | | | |
| Note: LLCs may have to pay minimum \$800 tax to the California France Board each year. For more information, go to https://www.ftb.ca.gov/ . | thise Tax | | | |
| · | | Thì | s Space For Off | fice Use Only |
| 1. Limited Liability Company Name (Must contain an LLC identifier | r such as LLC or L.L.C | . "LLC" will b | e added, if not incl | uded.) |
| Baby Built Solutions LL | C | | | |
| 2. Business Addresses | | | | |
| a. Initial Street Address of Principal Office - Do not enter a P.O. Box | City (no abbreviations | 5) | State | Zip Code |
| b. Initial Mailing Address of LLC. If different than item 2a | Elveria | | CA | 95626 |
| b. Initial Mailing Address of LLC, it different than item 2a | City (no abbreviations | 3 J | State | Zip Code |
| 3. Service of Process (Must provide either Individual OR Corporation.) | | | ' | 1 |
| INDIVIDUAL - Complete items 3a and 3b only. Must include agent's full na | ame and California stri | eet address. | | |
| a. California Agent's First Name (if agent is not a corporation) | ame and California stru Middle Name | Last Na | | Suffix |
| , | | Last Na | me 51row | Suffix |
| a. California Agent's First Name (if agent is not a corporation) \$\int \A \cdot \cd | Middle Name \[\int \con\gamma \sio \sigma \] City (no abbreviations) | Last Na | | Zip Code |
| a. California Agent's First Name (if agent is not a corporation) | Middle Name | Last Na | strom | |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box BHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the register | Middle Name DionySios City (no abbreviations) El Veula ered agent Corporation | Last Na | State | Zip Code |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 2400 Ancho way | Middle Name DionySios City (no abbreviations) El Veula ered agent Corporation | Last Na | State | Zip Code |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box BHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the register | Middle Name DionySios City (no abbreviations) El Veula ered agent Corporation | Last Na | State | Zip Code |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box BHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the registe c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) - Do not only include the name of the registered corporate Agent's Name (if agent is a corporation) | Middle Name DionySios City (no abbreviations) El Veula ered agent Corporation | Last Na | State | Zip Code |
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| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box PHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the register. c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not of the complete Item 3c. Only include the name of the register. 4. Management (Select only one box) The LLC will be managed by: | Middle Name DromySioS City (no abbreviations) El VCMA ared agent Corporation complete Item 3a or 3b | Last Na | State CA | Zip Code |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box CORPORATION - Complete Item 3c. Only include the name of the register. c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not one of the LLC will be managed by: One Manager More than One | Middle Name DromySioS City (no abbreviations) El Verice ared agent Corporation complete Item 3a or 3b Manager | Last Na | State CA C Member(s) | Zip Code 95626 |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box BHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the registe c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not of the LLC will be managed by: More than One 5. Purpose Statement (Do not alter Purpose Statement) The purpose of the limited liability company is to engage in an | Middle Name DionySios City (no abbreviations) Elucida ered agent Corporation complete Item 3a or 3b Manager my lawful act or act Liability Company | All LL ctivity for w | State CA C Member(s) | Zip Code 95626 |
| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box BHO ANCHO WAY CORPORATION - Complete Item 3c. Only include the name of the register. c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not of the LLC will be managed by: More than One 5. Purpose Statement (Do not alter Purpose Statement) The purpose of the limited liability company is to engage in armay be organized under the California Revised Uniform Limited 6. By signing, I affirm under penalty of perjury that the information of the significance of the content of the purpose of the limited of the california Revised Uniform Limited | Middle Name DromySios City (no abbreviations) El Veula ered agent Corporation complete Item 3a or 3b Manager Manager Ty lawful act or act Liability Company on herein is true act | All LL ctivity for way Act. | State CA C Member(s) which a limited and that I am a | Zip Code 95626 Iiability company authorized by |
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| a. California Agent's First Name (if agent is not a corporation) JASON b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box GRPORATION - Complete Item 3c. Only include the name of the registe c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not all the LLC will be managed by: \[\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\textstyle{\t | Middle Name Dromy Stos City (no abbreviations) El Valad ered agent Corporation complete Item 3a or 3b Manager Manager Manager Itability Company on herein is true agerein by reference and to this Form LLC-1.) | Last Na Room. All LL ctivity for we year of and correct I made part of the second correct of the second corre | State CA C Member(s) which a limited and that I am a this Form LLC-1. | Zip Code 95626 Iiability company authorized by |