



202464415551



California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: 202464415551 Date Filed: 10/31/2024

Limited Liability Company Name Limited Liability Company Name	CENTER FOR AUTISM & ANXIETY DISORDERS,LLC
Initial Street Address of Principal Office of LLC Principal Address	1442 IRVINE BLVD SUITE
Fillicipal Address	140
	TUSTIN, CA 92780
Initial Mailing Address of LLC	
Mailing Address	1442 IRVINE BLVD SUITE
	140
	TUSTIN, CA 92780
Attention	FARHAT CHAUDHRY
Agent for Service of Process	
Agent Name	Farhat Chaudhry
Agent Address	1442 IRVINE BLVD SUITE
	140
	TUSTIN, CA 92780
Purpose Statement	
	is to engage in any lawful act or activity for which a limited liability rnia Revised Uniform Limited Liability Company Act.
Management Structure	
The LLC will be managed by	One Manager
Additional information and signatures set for made part of this filing.	th on attached pages, if any, are incorporated herein by reference and
Electronic Signature	
By signing, I affirm under penalty of perjury California law to sign.	y that the information herein is true and correct and that I am authorized by
	10/31/2024
FARHAT CHAUDHRY	10/31/2024