

STATE OF CALIFORNIA

California Secretary of State

1500 11th Street

Office of the Secretary of State

STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

BA20242091017

DA202420910

For Office Use Only



File No.: BA20242091017 Date Filed: 11/27/2024

Sacramento, California 95814		
(916) 657-5448		
Entity Details		
Limited Liability Company Name	Shepherd's Son, LLC	
Entity No.	202464712996	
Formed In	CALIFORNIA	
Street Address of Principal Office of LLC		
Principal Address	1812 N. MAGNOLIA AVENUE CLOVIS, CA 93619	
Mailing Address of LLC		
Mailing Address	1812 N. MAGNOLIA AVENUE CLOVIS, CA 93619	
Attention		
Street Address of California Office of LLC		
Street Address of California Office	1812 N. MAGNOLIA AVENUE CLOVIS, CA 93619	
Manager(s) or Member(s)		
Manager or Member Name	Manager or Member Address	
+ Lalo Saavedra, Member	1812 N. MAGNOLIA AVENUE CLOVIS, CA 93619	
+ Lalo Saavedra, Manager	1812 N. MAGNOLIA AVENUE CLOVIS, CA 93619	
Agent for Service of Process		
Agent Name	Lalo Saavedra	
Agent Address	1812 N MAGNOLIA AVENUE CLOVIS, CA 93619	
Type of Business		
Type of Business	Medical Device Sales	
Email Notifications Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.	
Chief Executive Officer (CEO)		
CEO Name	CEO Address	
None Entered		
Labor Judgment No Manager or Member, as further defined by Californ	nia Corporations Code section 17702.09(a)(8), has an	

outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature		
By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.		
Sean D. Greengard	11/27/2024	
Signature	Date	