


21-309423

202119510417  
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07-23-2021 SV  
**FILED**Secretary of State  
State of California

JUL 16 2021

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	<b>Secretary of State</b> <b>Statement of Information</b> (Limited Liability Company)	<b>LLC-12</b>
	<b>146</b> <b>KPC</b>	

**IMPORTANT — This form can be filed online at bizfile.sos.ca.gov.**  
 Read instructions before completing this form.  
**Filing Fee — \$20.00**  
**Copy Fees —** First page \$1.00; each attachment page \$0.50;  
 Certification Fee — \$5.00 plus copy fees

<b>1. Limited Liability Company Name</b> (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.) Sun Ninja LLC	
<b>2. 12-Digit Secretary of State Entity (File) Number</b> 202119510417	<b>3. State, Foreign Country or Place of Organization</b> (only if formed outside of California) Delaware

<b>4. Business Addresses</b>			
a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
82 Nassau St #60375	New York	NY	10038
b. Mailing Address of LLC, if different than Item 4a	City (no abbreviations)	State	Zip Code
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	

<b>5. Manager(s) or Member(s)</b> If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and address(es) on Form LLC-12A.			
a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
Ryan		Gnesin	
b. Entity Name - Do not complete Item 5a			
c. Address	City (no abbreviations)	State	Zip Code
82 Nassau St #60375	New York	NY	10038

<b>6. Service of Process</b> (Must provide either Individual OR Corporation.)			
INDIVIDUAL — Complete Items 6a and 6b only. Must include agent's full name and California street address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	

CORPORATION — Complete Item 6c only. Only include the name of the registered agent Corporation.	
c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 6a or 6b	
Corporation Service Company Which Will Do Business In California As CSC - Lawyers Incorporating Service (C1592199)	

<b>7. Type of Business</b>
Describe the type of business or services of the Limited Liability Company
The procurement and sale of outdoor sunshade tents.

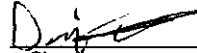
<b>8. Chief Executive Officer, if elected or appointed</b>			
a. First Name	Middle Name	Last Name	Suffix
Ryan		Gnesin	
b. Address	City (no abbreviations)	State	Zip Code
82 Nassau St #60375	New York	NY	10038

9. 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.

7-2-21  
Date

David Watts  
Type or Print Name of Person Completing the Form

Authorized Person  
Title

  
Signature



**Attachment to  
Statement of Information  
(Limited Liability Company)**

**LLC-12A  
Attachment**

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

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**B. 12-Digit Secretary of State Entity (File) Number**

202119510417

**C. State, Foreign Country, or Place of Organization** (only if formed outside of California)

Delaware

**D. List of Additional Manager(s) or Member(s)** - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.

2a. First Name - Do not complete Item 2b James	Middle Name	Last Name Stein	Suffix
2b. Entity Name - Do not complete Item 2a			
2c. Address 82 Nassau St. #60375	City (no abbreviations) New York	State NY	Zip Code 10038
3a. First Name - Do not complete Item 3b	Middle Name	Last Name	Suffix
3b. Entity Name - Do not complete Item 3a			
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 Item 4a			
4c. Address	City (no abbreviations)	State	Zip Code
5a. First Name - Do not complete Item 5b	Middle Name	Last Name	Suffix
5b. Entity Name - Do not complete Item 5a			
5c. Address	City (no abbreviations)	State	Zip Code
6a. First Name - Do not complete Item 6b	Middle Name	Last Name	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
8a. First Name - Do not complete Item 8b	Middle Name	Last Name	Suffix
8b. Entity Name - Do not complete Item 8a			
8c. Address	City (no abbreviations)	State	Zip Code