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LLC-12

IMPORTANT — This form can be filed online at bizfile.sos.ca.gov.

Read instructions before completing this form.

Filing Fee - \$20.00

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FILED
Secretary of State
State of California
MAR (1 8 2022

This Space For Office Use Only

1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

BOUNTIFUL INVESTMENTS LLC

2 0 2 0 0 3 6 1 0 4 8

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

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
18138 SANTA ARABELLA ST	FOUNTAIN VALLEY	CA	92708
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	

5. Manager(s) or Member(s)

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 additional managers/members, enter the names(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name		Suffix
DARIAN		DAHL		
b. Entity Name - Do not complete Item 5a				
c. Address	City (no abb	City (no abbreviations)		Zip Code
18138 SANTA ARABELLA ST	FOUNTAIN	FOUNTAIN VALLEY		92708

Service of Process (Must provide either Individual OR Corp	poration.)
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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)	Midd	le Name	Last Name	€		Suffix
DARIAN	:		DAHL			
b. Street Address (if agent is not a corporation) - Do not enter P.O. Box	a	City (no abbrev	iations)	State	Zip Co	ode
18138 SANTA ARABELLA ST		FOUNTAIN VALLEY		CA	92708	
CORPORATION - Complete Item 6c only. Only include the	ne nam	ne of the registere	d agent Co	rporation	 -	
c. California Registered Corporate Agent's Name (if agent is a c	corpora	ition) – Do not co	mplete Item	6a or 6b)	
7. Type of Business						
Describe the type of business or services of the Limited Liability	Comp	pany	· · · · · · · · · · · · · · · · · · ·			
REAL ESTATE MANAGEMENT	•					
8. Chief Executive Officer, if elected or appointed				-		
a. First Name	Middle Name Last Nam		Last Name	9		Suffix
DARIAN	DAHL					
b. Address	•	City (no abbrev	iations)	State	Zip Co	ode
18138 SANTA ARABELLA ST	FOUNTAIN VALLEY		CA	92708		
9. Labor Judgment						
Does any Manager or Member have an outstanding final j Division of Labor Standards Enforcement or a court of law therefrom is pending, for the violation of any wage order o	/, for v	vhich no appeal		Ye	es [No
By signing, I affirm under penalty of perjury that the in authorized by California law to sign.	nforma	ution herein is tr	ue and con	rect and	l that I	am
3/1/22 DARIAN DAHL		MEMBE	ER J	Janian	Dal	L
Date Type or Print Name		Title	Sig	gnature	·	