



202465012517

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**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**ARTICLES OF ORGANIZATION**  
**CA LIMITED LIABILITY COMPANY**  
California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: 202465012517

Date Filed: 12/19/2024

|   |  |            |  |
|---|--|------------|--|
| Limited Liability Company Name  | Limited Liability Company Name   |            | Viva Insurance & Tax Services LLC                  |
| Initial Street Address of Principal Office of LLC   | Principal Address  |            | 890 W OLIVE AVE<br>UNIT B<br>PORTERVILLE, CA 93257 |
| Initial Mailing Address of LLC  | Mailing Address  |            | 890 W OLIVE AVE<br>UNIT B<br>PORTERVILLE, CA 93257 |
|   | Attention  |            |  |
| Agent for Service of Process  | Agent Name   |            | Anthony A Anguiano                                 |
|   | Agent Address  |            | 890 W OLIVE AVE<br>UNIT B<br>PORTERVILLE, CA 93257 |
| Purpose Statement   | The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act. |            |  |
| Management Structure  | The LLC will be managed by   |            | More than One Manager                              |
| Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.   |  |            |  |
| Signatures  |  |            |  |
| <input checked="" type="checkbox"/> 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. |  |            |  |
| Anthony Anguiano  |  | 12/19/2024 |  |
| Organizer Signature   |  | Date       |  |
| Adriana Anguiano  |  | 12/19/2024 |  |
| Organizer Signature   |  | Date       |  |
| Cesar Rodriguez   |  | 12/19/2024 |  |
| Organizer Signature   |  | Date       |  |