







STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

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

-FILED-

File No.: BA20241961181 Date Filed: 11/5/2024

Entity Details	
Limited Liability Company Name	CameLAX LLC
Entity No.	202464419666
Formed In	CALIFORNIA
Street Address of Principal Office of LLC	
Principal Address	21206 DOLORES ST CARSON, CA 90745
Mailing Address of LLC	
Mailing Address	21206 DOLORES ST CARSON, CA 90745
Attention	
Street Address of California Office of LLC	
Street Address of California Office	21206 DOLORES ST CARSON, CA 90745
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
+ Bader Yousef	21206 DOLORES ST CARSON, CA 90745
+ Bader Yousef Agent for Service of Process	
Agent for Service of Process	CARSON, CA 90745
Agent for Service of Process Agent Name	BADER YOUSEF 21206 DOLORES ST
Agent for Service of Process Agent Name Agent Address	BADER YOUSEF 21206 DOLORES ST
Agent for Service of Process Agent Name Agent Address Type of Business	BADER YOUSEF 21206 DOLORES ST CARSON, CA 90745 Real estate and general business and consulting
Agent for Service of Process Agent Name Agent Address Type of Business Type of Business	BADER YOUSEF 21206 DOLORES ST CARSON, CA 90745
Agent for Service of Process Agent Name Agent Address Type of Business Type of Business Email Notifications	BADER YOUSEF 21206 DOLORES ST CARSON, CA 90745 Real estate and general business and consulting
Agent for Service of Process Agent Name Agent Address Type of Business Type of Business Email Notifications Opt-in Email Notifications	BADER YOUSEF 21206 DOLORES ST CARSON, CA 90745 Real estate and general business and consulting

Labor Judgment

No Manager or Member, as further defined by California 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.		
Bader Yousef	11/05/2024	
Signature	Date	