

**LLC-12** 

22-A57431

## **FILED**

In the office of the Secretary of State of the State of California

**JAN 28, 2022** 

This Space For Office Use Only

**IMPORTANT** — This form can be filed online at <u>bizfile.sos.ca.gov</u>.

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

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

AGRARIAN PROPERTIES, LLC

2. 12-Digit Secretary of State Entity Number

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

CALIFORNIA

## 4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
2040 Barlow Lane	Sebastopol	CA	95472
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
PO Box 610	Forestville	CA	95436
c. Street Address of <b>California</b> Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
2040 Barlow Lane	Sebastopol	CA	95472

## 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
Eric	J	Sussman			
b. Entity Name - Do not complete Item 5a					
c. Address	City (no abbre	City (no abbreviations)		Zip Co	de
13404 Dupont Rd	Sebastopol	Sebastopol		95472	

INDIVIDU	<b>AL</b> – Complete Items 6a and 6b only. Must inc	ude ag	ent's full name a	nd California	a street a	ddress	
a. California Ag	ent's First Name (if agent is <b>not</b> a corporation)	Midd	e Name	lame Last Name			Suffix
Eric		J		Sussman			
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b>		City (no abbreviations)		State	Zip Co	ode	
13404 Dupont F			Sebastopol		CA	95472	
CORPORA	ATION – Complete Item 6c only. Only include t	he nam	e of the registere	ed agent Co	rporation	١.	
c. California Re	gistered Corporate Agent's Name (if agent is a	corpora	tion) – Do not co	mplete Item	6a or 6b	)	
7. Type of Bu	usiness						
Describe the type	pe of business or services of the Limited Liabilit	y Comp	any				
Property rental							
8. Chief Exec	cutive Officer, if elected or appointed						
a. First Name		Midd	e Name	ame Last Name		Suffix	
b. Address			City (no abbreviations)		State	Zip Code	
9. Labor Jud	gment		<u> </u>				
of Labor Stand	ger or Member have an outstanding final jud dards Enforcement or a court of law, for wh ne violation of any wage order or provision o	ich no	appeal therefro		☐ Ye	es 🔽	☑ No
	g, I affirm under penalty of perjury that the indexing the second of the	nforma	tion herein is tr	ue and cor	rect and	I that I	am
01/28/2022	Eric J Sussman		Managing Member				
Date	Type or Print Name		Title	Sig	Signature		

**6. Service of Process** (Must provide either Individual **OR** Corporation.)