



202465014287



**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.: 202465014287

Date Filed: 12/30/2024

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Limited Liability Company Name Limited Liability Company Name	Family Roots Insurance Services, LLC
Initial Street Address of Principal Office of LLC Principal Address	1014 MONTEREY AVE FOSTER CITY, CA 94404
Initial Mailing Address of LLC Mailing Address  Attention	1014 MONTEREY AVE FOSTER CITY, CA 94404
Agent for Service of Process Agent Name Agent Address	Y'Maia Jackson 1014 MONTEREY AVE FOSTER CITY, CA 94404
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	One Manager
Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.	
Electronic Signature	
<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.	
<i>Y'Maia Jackson</i> Organizer Signature	<i>12/30/2024</i> Date