

STATE OF CALIFORNIA

California Secretary of State

Office of the Secretary of State

STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

BA20241606763

For Office Use Only



File No.: BA20241606763

| ALLFORN A | California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 | Date Filed: 9/6/2024 |
|--------------------------------|---|---|
| | (516) 557 5775 | |
| Entity Details | | |
| Limited Liability Company Name | | Seaside Interpreting LLC |
| Entity No. | | 202463713700 |
| Formed In | | CALIFORNIA |
| Street Address of Princ | | |
| Principal Address | | 17318 SAN LUIS STREET STE 2 |
| | | FOUNTAIN VALLEY, CA 92708 |
| Mailing Address of LLC | : | |
| Mailing Address | | 17318 SAN LUIS STREET |
| | | STE 2 FOUNTAIN VALLEY, CA 92708 |
| Attention | | |
| Street Address of Califo | ornia Office of LLC | |
| | f California Office | None |
| Manager(s) or Member | (s) | |
| Manager or Member Name | | Manager or Member Address |
| + Elizabeth Castillo | | 17318 SAN LUIS STREET |
| | | STE 2 |
| | | FOUNTAIN VALLEY, CA 92708 |
| + Jesus Castillo | | 17318 SAN LUIS STREET STE 2 |
| | | FOUNTAIN VALLEY, CA 92708 |
| | | |
| Agent for Service of Pro | ocess | |
| Agent Name | | Elizabeth Castillo |
| Agent Address | | 17318 SAN LUIS STREET STE 2 |
| | | FOUNTAIN VALLEY, CA 92708 |
| Type of Business | | |
| Type of Business | | Interpreting |
| Email Notifications | | |
| Opt-in Email Notifications | | No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail. |
| Chief Executive Officer | (CEO) | |
| CEO Name | | CEO Address |
| + Elizabeth Ca | astillo | 17318 SAN LUIS STREET |
| | | STE 2 FOUNTAIN VALLEY, CA 92708 |
| | | |
| Labor Judgment | | |
| | Member, as further defined by Califo | rnia 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. | | | |
| Elizabeth Castillo | 09/06/2024 | | |
| Signature | Date | | |
| | | | |
| | | | |