				For Office Use Only			
Secretary of State Articles of Organization Limited Liability Company (LLC)	LLC-1		-FILED- File No.: 202464511243 Date Filed: 11/1/2024				
Filing Fee - \$70.00 Certified Copy Fee (Optional) - \$5.00 Note: LLCs may have to pay minimum \$800 tax to the California Fr	1						
Board each year. For more information, go to https://www.ftb.ca.gov	<u>n</u> .		n	27 _	•		
Limited Liability Company Name (Must contain an LLC iden	tifier such as LLC or LLC		Space For Of added, if not inc		nly		
Shoman Transportations		· LLC WIII DE					
2. Business Addresses	-rvv1(C)						
a. Initial Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviation	City (no abbreviations)		e Zip Code			
48ho Dartmoor way	FILLEV	IK Grove		95757			
b. Initial Mailing Address of LLC, if different than item 2a	City (no abbreviations)		State				
3. Service of Process (Must provide either Individual OR Corporatio	n.)						
INDIVIDUAL - Complete Items 3a and 3b only. Must include agent's fi							
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Nam			Buffix		
(haled	<u> </u>		mah	'''''''			
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations		State	Zip Code	15 2		
CORPORATION Complete Home 20 Copy include the same of the re	SIKGYE		CA	ブララ	<u>+> </u>		
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do							
	10	-					
4. Management (Select only one box)							
The LLC will be managed by:		_					
One Manager More than C	ne Manager	All LLC	C Member(s)	1	_		
5. Purpose Statement (Do not alter Purpose Statement)							
The purpose of the limited liability company is to engage in may be organized under the California Revised Uniform Limi			hich a limited	l liability co	ompany		
6. By signing, I affirm under penalty of perjury that the information California law to sign.							
Additional signatures set forth on attached pages, if any, are incorporate should be 8 ½ x 11. one sided beginning and clearly marked as an attached	ment to this Form LLC-1.)	_			nents		
1/1/h/h.	Khice (Khaled shoman					
Organizer sign here	Print your n		, - ,,,,				