

STATE OF CALIFORNIA

California Secretary of State

Office of the Secretary of State

STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

BA20242006485

DA202420004

For Office Use Only



File No.: BA20242006485 Date Filed: 11/13/2024

| CALIFORNIA | 1500 11th Street Sacramento, California 95814 (916) 657-5448 | Date Filed: 11/13/2024 | |
|---|--|--|--|
| | | | |
| Entity Details | | | |
| Limited Liability Company Name | | HOPE TALENT STAFFING, LLC | |
| Entity No. | | 202464511330 | |
| Formed In | | CALIFORNIA | |
| Street Address of Prin | cipal Office of LLC | | |
| Principal Addres | SS | 333 CITY BLVD WEST #17TH FLOOR ORANGE, CA 92868 | |
| Mailing Address of LL | с | | |
| Mailing Address | | 333 CITY BLVD WEST #17TH FLOOR ORANGE, CA 92868 | |
| Attention | | | |
| Street Address of Cali | fornia Office of LLC | | |
| Street Address of | of California Office | None | |
| Manager(s) or Member(s) | | | |
| | Manager or Member Name | Manager or Member Address | |
| + MICHAEL A | ANTHONY GOCHEZ | 333 CITY BLVD WEST #17TH FLOOR ORANGE, CA 92868 | |
| + WENDY AF | RGENTINA GOCHEZ | 333 CITY BLVD WEST #17TH FLOOR ORANGE, CA 92868 | |
| Agent for Service of P | 100955 | | |
| Agent Name | | MICHAEL ANTHONY GOCHEZ | |
| Agent Address | | 333 CITY BLVD WEST #17TH FLOOR ORANGE, CA 92868 | |
| Type of Business | | | |
| Type of Busines | S | STAFFING | |
| Email Notifications | | | |
| Opt-in Email No | tifications | Yes, I opt-in to receive entity notifications via email. | |
| Chief Executive Office | r (CEO) | | |
| | CEO Name | CEO Address | |
| None Entered | | | |
| Labar Ind. | | | |
| 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 | | | |

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. | | | |
| MICHAEL ANTHONY GOCHEZ | 11/13/2024 | | |
| Signature | Date | | |
| | | | |