



202565514193

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**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.: 202565514193

Date Filed: 1/24/2025

Limited Liability Company Name	Lovelee Insurance Services, LLC
Initial Street Address of Principal Office of LLC Principal Address	551 ALANDELE AVE. LOS ANGELES, CA 90036
Initial Mailing Address of LLC Mailing Address	551 ALANDELE AVE LOS ANGELES, CA 90036
Attention	
Agent for Service of Process Agent Name	Stephanie K Lee
Agent Address	551 ALANDELE AVE LOS ANGELES, CA 90036
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.	
<u>Stephanie K Lee</u> Organizer Signature	<u>01/24/2025</u> Date