

Limited Liability Company Name

Street Address of Principal Office of LLC

Street Address of California Office of LLC Street Address of California Office

+ ANNA LIZA SANTIAGO

California Registered Corporate Agent (1505)

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Entity Details

Entity No.

Formed In

**Principal Address** 

Mailing Address of LLC

Mailing Address

Manager(s) or Member(s)

Agent for Service of Process

Type of Business Type of Business

Email Notifications

Attention

## STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY California Secretary of State



File No.: BA20241780438 Date Filed: 10/6/2024

LIMITED LIABILITY COM
California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

Manager or Member Name

ALSantiago Clinical Services LLC 202464112096 CALIFORNIA
5088 SHADOW VALLEY ST LAS VEGAS, NV 89148
5088 SHADOW VALLEY ST LAS VEGAS, NV 89148
5088 SHADOW VALLEY ST LAS VEGAS, CA 89148
Manager or Member Address
5088 SHADOW VALLEY ST LAS VEGAS, NV 89148
 UNITED STATES CORPORATION AGENTS, INC. Registered Corporate 1505 Agent
Nursing services including staffing
No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
 CEO Address

Chief Executive Officer (CEO)

**Opt-in Email Notifications** 

CEO Name	CEO Address
+ Anna Liza Santiago	5088 SHADOW VALLEY ST LAS VEGAS, NV 89148

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 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.					
ANNA LIZA SANTIAGO	10/06/2024				
Signature	Date				