



202463617448



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.: 202463617448 Date Filed: 8/30/2024

| Limited Liability Company Name | |
|---|--|
| Limited Liability Company Name | Safe Route Transportation LLC |
| Initial Street Address of Principal Office of LLC | |
| Principal Address | 548 MARKET ST #269350 |
| | SAN FRANCISCO, CA 94104 |
| Initial Mailing Address of LLC | |
| Mailing Address | 548 MARKET ST #269350 |
| | SAN FRANCISCO, CA 94104 |
| Attention | |
| Agent for Service of Process | |
| Agent Name | Corinthian James Allen Mixon |
| Agent Address | 4551 RENAISSANCE DR APT 524 |
| | SAN JOSE, CA 95134 |
| Purpose Statement | |
| The purpose of the limited liability company is to engage | |
| company may be organized under the California Revise | ed Uniform Limited Liability Company Act. |
| Management Structure | |
| The LLC will be managed by | All LLC Member(s) |
| Additional information and signatures set forth an attack | and pages if any are incorporated barein by reference and |
| made part of this filing. | ned pages, if any, are incorporated herein by reference and |
| Electronic Signature | |
| By signing, I affirm under penalty of perjury that the in | formation herein is true and correct and that I am authorized by |
| California law to sign. | ionnation herein is true and correct and that I am dathonzed by |
| | |
| | 00/00/0004 |
| Corinthian James Allen Mixon | 08/30/2024 |
| Organizer Signature | Date |
| | |