



202465111113



**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.: 202465111113  
 Date Filed: 12/29/2024

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Limited Liability Company Name Limited Liability Company Name	Controlled Experience LLC
Initial Street Address of Principal Office of LLC Principal Address	43206 GIOVANNI TERRACE FREMONT, CA 94539
Initial Mailing Address of LLC Mailing Address  Attention	43206 GIOVANNI TERRACE FREMONT, CA 94539  Alpha Kaba
Agent for Service of Process Agent Name Agent Address	Alpha K Kaba 43206 GIOVANNI TERRACE FREMONT, CA 94539
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	All LLC Member(s)
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.	
<i>Alpha Kaba</i> Organizer Signature	<i>12/29/2024</i> Date