

LLC-12

22-B39326

FILED

In the office of the Secretary of State of the State of California

MAR 03, 2022

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IMPORTANT — This form can be filed online at <u>bizfile.sos.ca.gov</u>.

Read instructions before completing this form.

Filing Fee - \$20.00

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the **exact** name of the LLC. If you registered in California using an alternate name, <u>see instructions</u>.)

MONDO BONGO, LLC

2. 12-Digit Secretary of State Entity Number
3. State, Foreign Country or Place of Organization (only if formed outside of California)
CALIFORNIA

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
9100 WILSHIRE BLVD STE 1000W	BEVERLY HILLS	CA	90212
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
9100 WILSHIRE BLVD STE 1000W	BEVERLY HILLS	CA	90212
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
9100 WILSHIRE BLVD STE 1000W	BEVERLY HILLS	CA	90212

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name)		Suffix
William	В.	Pitt			
b. Entity Name - Do not complete Item 5a					
c. Address	City (no abbrev	iations)	State	Zip Co	de
9100 WILSHIRE BLVD STE 1000W	BEVERLY HILL	S	CA	90212	

INDIVIDUA	L – Complete Items 6a and 6b only. Must incl	ude ag	ent's full name a	nd California	a street a	address	
a. California Age	nt's First Name (if agent is not a corporation)	Midd	le Name	Last Name			Suffix
Warren				Grant			
b. Street Address P.O. Box			City (no abbrev	iations)	State	Zip Co	ode
9100 WILSHIRE	BLVD STE 1000W		BEVERLY HILL	_Y HILLS		90212	
CORPORA	TION – Complete Item 6c only. Only include the	he nam	ne of the registere	ed agent Co	rporatior	1.	
c. California Reg	istered Corporate Agent's Name (if agent is a o	corpora	ition) – Do not co	mplete Item	6a or 6l	0	
7. Type of Bu	siness						
Describe the type	e of business or services of the Limited Liability	/ Comp	pany				
Real Estate inve	estment						
8. Chief Execu	utive Officer, if elected or appointed						
a. First Name		Midd	le Name	Last Name			Suffix
William		B.	Pitt				
b. Address		ı	City (no abbreviations) St		State	Zip Code	
9100 WILSHIRE	BLVD STE 1000W		BEVERLY HILLS		CA	90212	
9. Labor Judg	ıment						
of Labor Standa	er or Member have an outstanding final jud ards Enforcement or a court of law, for whi e violation of any wage order or provision o	ch no	appeal therefro		☐ Ye	es 🕨	☑ No
	, I affirm under penalty of perjury that the in by California law to sign.	nforma	ition herein is tr	ue and cor	rect and	I that I	am
00/00/000							
03/03/2022	erin coovert		authorized person				
Date	Type or Print Name		Title	Signature			

6. Service of Process (Must provide either Individual **OR** Corporation.)