



202464112387

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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.: 202464112387

Date Filed: 10/4/2024

|   |  |
|---|--|
| Limited Liability Company Name  | Adventure Retirement Insurance Solutions LLC   |
| Initial Street Address of Principal Office of LLC   | 22437 CASA DE CAROL  |
| Principal Address   | RAMONA, CA 92065   |
| Initial Mailing Address of LLC  | 22437 CASA DE CAROL  |
| Mailing Address   | RAMONA, CA 92065   |
| Attention   |  |
| Agent for Service of Process  | UNITED STATES CORPORATION AGENTS, INC.   |
| California Registered Corporate Agent (1505)  | Registered Corporate 1505 Agent  |
| 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  | 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. |  |
| <u>Daniel Frantz</u>  | <u>10/04/2024</u>  |
| Organizer Signature   | Date   |