





## 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.: 202464415180 Date Filed: 11/15/2024

| Limited Liability Company Name  |   |
|---|---|
| Limited Liability Company Name  | USA ASSISTED LOVING CARE LLC  |
| Initial Street Address of Principal Office of LLC   |   |
| Principal Address   | 6089 LA FLECHA  |
|   | RANCHO SANTA FE, CA 92067   |
| Initial Mailing Address of LLC  |   |
| Mailing Address   | P.O. BOX 212215<br>CHULA VISTA, CA 91921  |
| Attention   | ·   |
| Attention   | Georgette del Rio   |
| Agent for Service of Process  |   |
| Agent Name  | Georgette del Rio   |
| Agent Address   | 6089 LA FLECHA<br>RANCHO SANTA FE, CA 92067   |
|   | MANCHO SANTA FE, CA 92007   |
| Purpose Statement   |   |
|   | is to engage in any lawful act or activity for which a limited liability<br>rnia Revised Uniform Limited Liability Company Act. |
| ——————————————————————————————————————  | Thia Nevised Official Limited Elability Company Act.  |
| Management Structure  |   |
| The LLC will be managed by  | One Manager   |
|   |   |
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| Additional information and signatures set for made part of this filing.                         | th on attached pages, if any, are incorporated herein by reference and  |
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| made part of this filing.  Electronic Signature   | th on attached pages, if any, are incorporated herein by reference and  |
| made part of this filing.  Electronic Signature   By signing, I affirm under penalty of perjury |   |
| made part of this filing.  Electronic Signature  By signing, I affirm under penalty of perjury  |   |