			For Off	ice Use Only
Secretary of State	LLC-1		-FI	LED-
Articles of Organization			I- N 00040	25440700
Limited Liability Company (LLC)			le No.: 20246 ate Filed: 12/	
Filing Fee - \$70.00	)			
Filing Fee - \$70.00  Certified Copy Fee (Optional) - \$5.00				
Note: LLCs may have to pay minimum \$800 tax to the California Fra		•		
Board each year. For more information, go to https://www.fib.ca.gov/	•			
	ļ	This S	pace For Of	fice Use Only
1. Limited Liability Company Name (Must contain an LLC identii	fier such as LLC or L.L.	C. "LLC" will be a	dded, if not inc	cluded.)
SILVER SKY RANCH GP LLC				
2. Business Addresses				
a, Initial Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviation	ns)	State	Zip Code
6900 Chileno Valley Road	Petaluma		CA	94952
b. Initial Mailing Address of LLC, if different than item 2a	City (no abbreviation	ns)	State	Zip Code
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	·	·		
3. Service of Process (Must provide either Individual OR Corporation	· )			
Service of Process (Must provide either Individual OR Corporation     INDIVIDUAL – Complete Items 3s and 3b only. Must include agent's ful	•	treet address.		
·	•	treet address.		Suffix
INDIVIDUAL - Complete Items 3a and 3b only. Must include agent's ful a. California Agent's First Name (if agent is not a corporation)	I name and California s Middle Name	Last Name		
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful	Il name and California s	Last Name	State	Suffix Zip Code
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INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful  a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	I name and California s  Middle Name  City (no abbreviations istered agent Corporations	Last Name	State	
INDIVIDUAL - Complete Items 3a and 3b only. Must include agent's ful  a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the regi	I name and California s  Middle Name  City (no abbreviations istered agent Corporations of complete Item 3a or 3	Last Name	State	
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's full a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a p.O. Do not enter a p.O. Box	I name and California s  Middle Name  City (no abbreviations istered agent Corporations of complete Item 3a or 3	Last Name	State	
a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  Patrick J. McNeil, a Professional Corporation	I name and California s  Middle Name  City (no abbreviations istered agent Corporations of complete Item 3a or 3	Last Name	State	
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful  a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the regi  c. California Registered Corporate Agent's Name (if agent is a corporation) - Do n  Patrick J. McNeil, a Professional Corporation  4. Management (Select only one box)	Il name and California s  Middle Name  City (no abbreviations istered agent Corporations not complete Item 3a or 3.	Last Name	State	Zip Code
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  Corporation - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  The LLC will be managed by:	Il name and California s  Middle Name  City (no abbreviations istered agent Corporations not complete Item 3a or 3.	Last Name	State CA	Zip Code
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  Corporation - Complete Item 3c. Only include the name of the region.  California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  The LLC will be managed by:  One Manager  More than One	Middle Name  Middle Name  City (no abbreviations stered agent Corporations not complete Item 3a or 3.)	Last Name	State  CA  Member(s	Zip Code
INDIVIDUAL - Complete Items 3s and 3b only. Must include agent's ful a. California Agent's First Name (if agent is not a corporation)  b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box  CORPORATION - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  Corporation - Complete Item 3c. Only include the name of the region. California Registered Corporate Agent's Name (if agent is a corporation) - Do not enter a P.O. Box  Patrick J. McNeil, a Professional Corporation  4. Management (Select only one box)  The LLC will be managed by:  One Manager  One Manager  More than One 5. Purpose Statement (Do not alter Purpose Statement)  The purpose of the limited liability company is to engage in	Middle Name  Middle Name  City (no abbreviations istered agent Corporations of complete Item 3a or 3 and Liability Compared Liability Compared Liability Compared Compared Liability Com	Last Name  All LLC  activity for while the control of the control	State  CA  Member(s	Zip Code

Andrew P. Stoll
Print your name here

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