

STATE OF CALIFORNIA

Office of the Secretary of State

ARTICLES OF ORGANIZATION CA LIMITED LIABILITY COMPANY

202464514726

For Office Use Only



File No.: 202464514726

| | L&B Transitional and Independent Living Housi | |
|--|--|----------|
| Limited Liability Company Name Limited Liability Company Name | | |
| | | ig, LLC |
| Initial Street Address of Principal Office of LLC Principal Address | 750 OTAY LAKES ROAD #2049 CHULA VISTA, CA 91910 | |
| Initial Mailing Address of LLC Mailing Address | 750 OTAY LAKES ROAD #2049 CHULA VISTA, CA 91910 | |
| Attention | Kim Collier | |
| Agent for Service of Process Agent Name Agent Address | Kim Collier 750 OTAY LAKES ROAD #2049 CHULA VISTA, CA 91910 | |
| Purpose Statement The purpose of the limited liability company is to en company may be organized under the California Re | gage in any lawful act or activity for which a limited liab evised Uniform Limited Liability Company Act. | ility |
| Management Structure The LLC will be managed by | One Manager | |
| Additional information and signatures set forth on a made part of this filing. | ttached pages, if any, are incorporated herein by refere | nce and |
| Electronic Signature | | |
| By signing, I affirm under penalty of perjury that the California law to sign. | ne information herein is true and correct and that I am auth | orized b |
| Kim Collier | 11/08/2024 | |
| Organizer Signature | Date | |

by