State







Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

1500 11th Street Sacramento, California 95814 (916) 657-5448

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-FILED-

File No.: BA20241918834 Date Filed: 10/30/2024

Entity Details Limited Liability Company Name	Alejandrinah Mendes Studio LLC
Entity No.	202464411560
Formed In	CALIFORNIA
Street Address of Principal Office of LLC	
Principal Address	1180 MAPLE ST RAMONA, CA 92065
Mailing Address of LLC	
Mailing Address	1180 MAPLE ST RAMONA, CA 92065
Attention	
Street Address of California Office of LLC Street Address of California Office	None
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
+ Abel Mendez	1180 MAPLE ST RAMONA, CA 92065
Agent for Service of Process	
California Registered Corporate Agent (1505)	REGISTERED AGENTS INC Registered Corporate 1505 Agent
Type of Business Type of Business	Cleaning-sanitation
Email Notifications Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Chief Executive Officer (CEO)	
CEO Name	CEO Address
None Entered	
	rnia Corporations Code section 17702.09(a)(8), has an Labor Standards Enforcement or a court of law, for which no r or provision of the Labor Code.
Electronic Signature	
By signing, I affirm under penalty of perjury that the California law to sign.	information herein is true and correct and that I am authorized by
Abel Mendez	10/30/2024
Signature	Date