



202354219484



# 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) 653-3516 For Office Use Only

-FILED-

File No.: 202354219484 Date Filed: 1/10/2023

Limited Liability Company Name	828 LLC
Initial Street Address of Principal Office of LLC	
Principal Address	8525 SUTTER CREEK WAY ANTELOPE, CA 95843
Initial Mailing Address of LLC	
Mailing Address	8525 SUTTER CREEK WAY ANTELOPE, CA 95843
Attention	Alex Chaw
Agent for Service of Process	
Agent Name	Alex Chaw
Agent Address	8525 SUTTER CREEK WAY ANTELOPE, CA 95843
	is to engage in any lawful act or activity for which a limited liability rnia Revised Uniform Limited Liability Company Act.
Management Structure	
The LLC will be managed by	One Manager
<b>5</b> ,	
<u> </u>	th on attached pages, if any, are incorporated herein by reference and
Additional information and signatures set fort	th on attached pages, if any, are incorporated herein by reference and
Additional information and signatures set fort made part of this filing.  Electronic Signature	th on attached pages, if any, are incorporated herein by reference and that the information herein is true and correct and that I am authorized by
Additional information and signatures set fort made part of this filing.  Electronic Signature  By signing, I affirm under penalty of perjury to	

Date of this notice: 10-28-2022

Employer Identification Number:

92-0861489

Form: SS-4

Number of this notice: CP 575 G

828 ALEX CHAW SOLE MBR 8525 SUTTER CREEK WAY ANTELOPE, CA 95843

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 92-0861489. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an EIN for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIN, please contact us at the phone number or address listed on the top of this notice.

When filing tax documents, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

#### IMPORTANT REMINDERS:

- Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- Refer to this EIN on your tax-related correspondence and documents.
- Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is 828. You will need to provide this information along with your EIN, if you file your returns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

Keep this part for your records. CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-28-2022 ) EMPLOYER IDENTIFICATION NUMBER: 92-0861489

NOBOD

FORM: SS-4

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 

828 ALEX CHAW SOLE MBR 8525 SUTTER CREEK WAY ANTELOPE, CA 95843

### City and County of San Francisco Office of Treasurer & Tax Collector

Business NameReference CodeSubmission Date828000001438010/28/2022

### **Business Identification**

Organization Type	Is this business a non-profit?
Limited Liability Company	No
Business Name	Business Tax IDentification Number
828	**-***1489
Start date in San Francisco	
10/27/2022	
Business email address	Telephone number
chaw.alex@gmail.com	415-845-4903
City Bidder/Supplier?	
No	
Is this a change of ownership for an existing business?	
No	

### **Business Mailing Address**

8525 Sutter Creek WAY Antelope, CA 95843

# **Ownership Information**

### **Owner 1**

Name Alex Chaw	SSN or TIN **-***0787	
Email address chaw.alex@gmail.com	Telephone number 415-845-4903	

#### **Owner Address**

8525 Sutter Creek WAY Antelope, CA 95843

### **Business Officers**

Name	Title	Phone	Email
Alex Chaw	Owner	415-845-4903	chaw.alex@gmail.com

### **Identification of Business Activities**

- □ 1 . Accommodations (7210-7219) (Includes Short Term Residential Rental Hosts)
- □ 2 . Administrative and Support Services (5600-5699)
- □ 3 . Arts, Entertainment, and Recreation (7100-7199)
- □ 4 . Biotechnology (N/A)
- □ 5 . Certain Services (8100-8139)
- □ 6 . Clean Technology (N/A)
- □ 7 . Construction (2300-2399)
- □ 8 . Financial Services (5210-5239)
- □ 10 . Information (5100-5199)
- □ 11 . Insurance (5240-5249)
- □ 12 . Manufacturing (3100-3399)
- $\square$  13 . Private Education and Health Services (6100-6299)
- □ 14 . Professional, Scientific, and Technical Services (5400-5499)
- □ 15 . Real Estate and Rental and Leasing Services (5300-5399)
- □ 16 . Retail Trade (4400-4599)
- $\square$  17 . Transportation and Warehousing (4800-4999)
- □ 18 . Utilities (2200-2299)
- □ 19 . Wholesale Trade (4200-4299)
- □ 20 . Activity not listed above (N/A)

Are all your business activities wholly within San Francisco? Yes

### **Business Information**

1. What is the average number of employees per week, including those outside of San Francisco?	1
2. What is the estimated San Francisco payroll expense?	\$60,000.00
3. What is the estimated San Francisco gross receipts for the current calendar year?	\$0.00
4. Does this business have taxable Business Personal Property in San Francisco?	No
5. Does this business receive rental income from four or more residential units in one building?	No
6. Does this business sell cannabis products?	No
7. Is this business exempt from paying the Registration fee?	No

# **Ownership Taxes and Fees**

No - Access Line Tax

No - Telephone Users Tax

No - Utility Users Tax

No - Traffic Congestion Mitigation Tax

### **Locations**

#### **Location 1**

Location trade name (DBA)	Location start date in San Francisco
828	10/27/2022
Is this a ground floor commercial location in San Francisco?	Is this location for formula retail use?
Yes	No

#### **Location Address**

2111 Harrison ST San Francisco, CA 94110

#### **Location Taxes & Fees**

No - Short Term Residential Rental

No - Transient Occupancy Tax, Tourism Improvement District & Moscone Expansion District Fees

No - Transient Occupancy Tax Small Operator

No - Parking Tax (may require completion of Certificate of Authority)

No - Parking Tax Small Operator

No - Cigarette Litter Abatement

No - Sugary Drinks Tax

### **Location 2**

Location trade name (DBA)	Location start date in San Francisco
828	10/27/2022
Is this a ground floor commercial location in San Francisco?	Is this location for formula retail use?
Yes	No

#### **Location Address**

1101 4th ST San Francisco, CA 94158

#### **Location Taxes & Fees**

No - Short Term Residential Rental

- No Transient Occupancy Tax, Tourism Improvement District & Moscone Expansion District Fees
- No Transient Occupancy Tax Small Operator
- No Parking Tax (may require completion of Certificate of Authority)
- No Parking Tax Small Operator
- No Cigarette Litter Abatement
- No Sugary Drinks Tax

### **First Year Free Program**

Do you want to participate in the First Year Free program?

Yes, I want to participate

I understand that if this business has more than \$10,000,000 in San Francisco gross receipts

for the calendar year that business commenced in San Francisco, or the three calendar years

following, this business will need to pay the amounts waived

(first-year permits, initial licenses and initial business registration fees).

Yes, I want to participate

Yes, I want to participate

I understand that data related to this business's eligibility, including this business's gross receipts, may be shared with other City departments to facilitate enrollment and participation in the program.

Yes, I agree

### **Taxpayer Statement**

I certify under penalty of perjury that I am the taxpayer (including an officer, general partner, member manager, executor, trustee, fiduciary, or other individual with the authority to bind the taxpayer), or an agent of the taxpayer authorized to sign this form on behalf of the taxpayer puruant to a validly executed Power of Attorney (see Instructions), and I have examined the foregoing business tax statement including any accompanying schedules or worksheets, and the information thereon is, to the best of my knowledge and belief, true and correct, and fully compliant with all the requirements provided in the San Francisco Business and Tax Regulations Code. I acknowledge that I am providing information in response to a request for financial information pursuant to Section 6.5-1 of the San Francisco Business and Tax Regulations Code. I am required by law to complete this form in its entirety and understand this statement is subject to audit.

Alex Chaw

Name

chaw.alex@gmail.com

**Email** 

Owner

Title

828

Company

DocuSigned by:

. C7EE5B4A898C461...

Signature