

STATE OF CALIFORNIA

Office of the Secretary of State

STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

BA20241970923

For Office Use Only



ALFORT T	LIMITED LIABILITY COMPANY California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448	File No.: BA20241970923 Date Filed: 11/6/2024
Entity Details	2N	
Limited Liability Company Name		Masido Integrative Health, LLC
Entity No. Formed In		202464418380 CALIFORNIA
Street Address of Princ	ipal Office of LLC	
Principal Address		3750 CONVOY STREET SUITE 310 SAN DIEGO, CA 92111
Mailing Address of LLC		
Mailing Address		3750 CONVOY STREET SUITE 310 SAN DIEGO, CA 92111
Attention		Max Doshay
Street Address of Califo	ornia Office of LLC	
Street Address of California Office		3750 CONVOY STREET SUITE 310 SAN DIEGO, CA 92111
Manager(s) or Member	(5)	
Manager or Member Name		Manager or Member Address
Monima Behavioral Health LLC		3750 CONVOY STREET SUITE 310 SAN DIEGO, CA 92111
Agent for Service of Pro	DCESS	
Agent Name		Max Doshay
Agent Address		3750 CONVOY STREET SUITE 310 SAN DIEGO, CA 92111
Type of Business Type of Business	5	Own and manage a specialized treatment center
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
	N	None Entered
Labor Judgment		
No Manager or loutstanding fina		ia Corporations Code section 17702.09(a)(8), has an abor Standards Enforcement or a court of law, for which no

appeal is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature			
By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.			
11/06/2024			
Date			