



B20250113945



**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) 657-5448

For Office Use Only

**-FILED-**

File No.: B20250113945

Date Filed: 5/9/2025

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Limited Liability Company Name	
Limited Liability Company Name	RIOCALI RECOVERY CENTER LLC
Initial Street Address of Principal Office of LLC	
Principal Address	6210 WILSHIRE BLVD STUDIO 209 LOS ANGELES, CA 90048
Initial Mailing Address of LLC	
Mailing Address	6210 WILSHIRE BLVD STUDIO 209 LOS ANGELES, CA 90048
Attention	
Agent for Service of Process	
Agent Name	CLEYTON ALVES
Agent Address	6210 WILSHIRE BLVD STUDIO 209 LOS ANGELES, CA 90048
Purpose Statement	
The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.	
Management Structure	
The LLC will be managed by	All LLC Member(s)
Additional information and signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this filing.	
Electronic Signature	
<input checked="" type="checkbox"/> 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.	
LOVETTE DOBSON	05/09/2025
Organizer Signature	Date