



202463919082



**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.: 202463919082

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|                                                                                                                                               |                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Limited Liability Company Name                                                                                                                | ANZA 20700, LLC                                                                                                                                                                                                    |
| Initial Street Address of Principal Office of LLC<br>Principal Address                                                                        | 1187 COAST VILLAGE RD<br>STE 1-640<br>SANTA BARBARA, CA 93108                                                                                                                                                      |
| Initial Mailing Address of LLC<br>Mailing Address                                                                                             | 1187 COAST VILLAGE RD<br>STE 1-640<br>SANTA BARBARA, CA 93108                                                                                                                                                      |
| Attention                                                                                                                                     |                                                                                                                                                                                                                    |
| Agent for Service of Process<br>Agent Name                                                                                                    | Braden Bohlinger                                                                                                                                                                                                   |
| Agent Address                                                                                                                                 | 1187 COAST VILLAGE RD<br>STE 1-640<br>SANTA BARBARA, CA 93108                                                                                                                                                      |
| 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 One Manager                                                                                                                                                                             |
| 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.                              |
| <i>braden bohlinger</i><br>Organizer Signature                                                                                                | <i>09/24/2024</i><br>Date                                                                                                                                                                                          |