



202565416972



(916) 657-5448

Sacramento, California 95814

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-FILED-

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File No.: 202565416972 Date Filed: 1/24/2025

Limited Liability Company Name	STPro Insurance Services, LLC
Initial Street Address of Principal Office of LLC	
Principal Address	3150 VIA DE CABALLO ENCINITAS, CA 92024
Initial Mailing Address of LLC	
Mailing Address	3150 VIA DE CABALLO ENCINITAS, CA 92024
Attention	
Agent for Service of Process	
Agent Name	Sara Sadri
Agent Address	3333 MICHELSON DRIVE
	300 IRVINE, CA 92612
	INVINE, CA 92012
Dumana Chatanana	
	s to engage in any lawful act or activity for which a limited liability rnia Revised Uniform Limited Liability Company Act.
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The purpose of the limited liability company is company may be organized under the Califo Management Structure The LLC will be managed by Additional information and signatures set for made part of this filing. Electronic Signature	rnia Revised Uniform Limited Liability Company Act. All LLC Member(s)
The purpose of the limited liability company is company may be organized under the Califo Management Structure The LLC will be managed by Additional information and signatures set for made part of this filing. Electronic Signature By signing, I affirm under penalty of perjury	rnia Revised Uniform Limited Liability Company Act. All LLC Member(s) th on attached pages, if any, are incorporated herein by reference and