

David Money

Organizer Signature



202565118218



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File No.: 202565118218 Date Filed: 1/3/2025

Limited Liability Company Name Limited Liability Company Name SloMed LLC Initial Street Address of Principal Office of LLC **Principal Address** 810 FIERO LANE SUITE 200 SAN LUIS OBISPO, CA 93401 Initial Mailing Address of LLC Mailing Address 810 FIERO LANE SUITE 200 SAN LUIS OBISPO, CA 93401 Attention Agent for Service of Process Agent Name Matthew Quaglino 810 FIERO LANE Agent Address SUITE 200 SAN LUIS OBISPO, CA 93401 **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 More than 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 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.

01/03/2025

Date