

**LLC-12** 

22-A33709

## **FILED**

In the office of the Secretary of State of the State of California

**JAN 19, 2022** 

This Space For Office Use Only

**IMPORTANT** — This form can be filed online at <u>bizfile.sos.ca.gov</u>.

Read instructions before completing this form.

Filing Fee - \$20.00

**Copy Fees -** First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

**1. Limited Liability Company Name** (Enter the **exact** name of the LLC. If you registered in California using an alternate name, <u>see instructions</u>.)

SAMANI COSMECEUTICALS LLC

2. 12-Digit Secretary of State Entity Number

3. State, Foreign Country or Place of Organization (only if formed outside of California)

CALIFORNIA

## 4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
360 Rose Street	Danville	CA	94602
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
360 Rose Street	Danville	CA	94602
c. Street Address of <b>California</b> Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
360 Rose Street	Danville	CA	94602

## 5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	)		Suffix	
Sonia		Badreshia				
b. Entity Name - Do not complete Item 5a						
c. Address	City (no abbre	/iations)	State	Zip Code		
12015 Mirabel Way	Porter ranch	Porter ranch		91326	91326	

INDIVIDU	<b>AL</b> – Complete Items 6a and 6b only. Must inc	lude ag	ent's full name	and Californi	a street a	address	·
a. California Ag	pent's First Name (if agent is <b>not</b> a corporation)	Midd	e Name	Last Name			Suffix
Sonia				Badreshia	a		
b. Street Addre	ss (if agent is <b>not</b> a corporation) - <b>Do not enter</b>	а	City (no abbr	eviations)	State	Zip Co	ode
12015 Mirabel V	Vay		Porter Ranch	<b>CA</b> 913		91326	;
CORPORA	ATION – Complete Item 6c only. Only include t	he nam	e of the regist	ered agent Co	orporation	۱.	
c. California Re	gistered Corporate Agent's Name (if agent is a	corpora	tion) – Do not	complete Iten	n 6a or 6l	)	
7. Type of Bu	usiness						
Describe the tyl	pe of business or services of the Limited Liabilit	y Comp	any				
Skin Care							
8. Chief Exec	cutive Officer, if elected or appointed						
a. First Name		Midd	dle Name Last Nam		ne		Suffix
b. Address	ddress City (no abbreviations)		eviations)	ions) State Zip C		ode	
9. Labor Jud	gment				1	•	
Does a Manag	ger or Member have an outstanding final jud	damen	t issued by th	e Division			
of Labor Stand	dards Enforcement or a court of law, for when the violation of any wage order or provision of	ich no	appeal theref		☐ Ye	es [•	☑ No
40 Decelerate			#1 I1 t	4		1 414 1	
	g, I affirm under penalty of perjury that the i d by California law to sign.	nioma	luon nerein is	true and co	rrect and	ımacı	am
01/19/2022	Dawn Bazurto		Controller				
Date	Type or Print Name		Title	Si	Signature		

**6. Service of Process** (Must provide either Individual **OR** Corporation.)