	r of State t of Information iability Company)	LLC-12	16-35254 Filei	2		
IMPORTANT — Read instru	actions before completing this form.		Secretary of State State of California			
Filing Fee - \$20.00			DEC 15	DEC 1 5 2016		
Copy Fees – Face Page \$1. Certification Fee - \$5.00	00 & .50 for each attachment page;		21 20 PC This Space For Offic	e Use C)nlý	
1. Limited Liability Company Gollwing, LLC	Name					
2. 12-Digit Secretary of State 201	File Number 634010209	3. State or P	lace of Organization (only if formed	outside	of Calif	omia)
4. Business Addresses						
. Street Address of Principal Office - Do not list a P.O. Box		City (no abbreviations)		State		
2884 Sawtelle Blvd. #214		Los Angeles			9006	4
b. Mailing Address of LLC, if different than item 4a		City (no abbreviations)		State	Zip Co	de
Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box 2884 Sawtelle Blvd. #214		City (no abbreviations) Los Angeles		State CA	Zip Code 90064	
5. Manager(s) or Member(s)	If no managers have been appointed or elect must be listed. If the manager/member is an inc entity, complete Items 5b and 5c (leave Item 5a additional managers/members, enter the name	dividual, complete it a blank). Note: The	ems 5a and 5c (leave Item 5b blank). If the LLC cannot serve as its own manager or	e manage	r/memb	er is an
a. First Name, if an individual - Do not o Patrick	First Name, if an individual - Do not complete Item 5b Patrick		Last Name Golling			Suffix
b. Entity Name - Do not complete Item :	5a					
c. Address 2884 Sawtelle Blvd. #214		City (no abbreviations) Los Angeles		Ştate	State Zip Code CA 90064	
6. Agent for Service of Process	Item 6a and 6b: If the agent is an individual, t agent's name and California address. Item 6c:	he agent must resid	e in California and Item 6a and 6b must be Ilifornia Registered Corporate Agent, a cu	complete rrent agei	d with the	ie
California Agent's First Name (if agent is not a corporation)		Middle Name	Last Name	1-60 blank	<u>).</u>	Suffix
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box		City (no abbreviat	ions)	State CA	Zip C	de
c. California Registered Corporate Age Legalzoom.com, Inc.	nt's Name (if agent is a corporation) - Do not complete	e item 6a on 6br/9			<u> </u>	
7. Type of Business		0121	·	<u>-</u>		
a. Describe the type of business or sen						<u> </u>
	LLC that will be developing homes.	I won't be dev	veloper just investor			
	LLC that will be developing homes.	I won't be dev	veloper just investor			
I will be investing in an I	LLC that will be developing homes.	I won't be dev	Last Name			Suffix
I will be investing in an I 8. Chief Executive Officer, if o	LLC that will be developing homes.	······································	Last Name	State	Zip C	[
I will be investing in an I 8. Chief Executive Officer, if o a. First Name b. Address	LLC that will be developing homes.	Middle Name City (no abbrevia	Last Name	State	Zip C	[
I will be investing in an I 8. Chief Executive Officer, if of a. First Name b. Address 9. The Information contained 12/09/2016 Chem	LLC that will be developing homes. elected or appointed herein, including any attachments, is tru yenne Moseley	Middle Name City (no abbrevia le and correct.	Last Name tions)	State	zip c	[
I will be investing in an I 8. Chief Executive Officer, if of a. First Name b. Address 9. The Information contained 12/09/2016 Cher Date Type Return Address (Optional) (For	LLC that will be developing homes. elected or appointed	Middle Name City (no abbrevia le and correct. A T ed to this document	Last Name tions) Authorized Rep. itile Signature , or if purchasing a copy of the filed docur	 	1 1 1 the nar	ode
I will be investing in an I 8. Chief Executive Officer, if of a. First Name b. Address 9. The Information contained 12/09/2016 Cher Date Type Return Address (Optional) (For person or comp	LLC that will be developing homes. elected or appointed	Middle Name City (no abbrevia le and correct. A T ed to this document	Last Name tions) Authorized Rep. itile Signature , or if purchasing a copy of the filed docur	 	1 1 1 the nar	ode
I will be investing in an I 8. Chief Executive Officer, if of a. First Name b. Address 9. The Information contained 12/09/2016 Cher Date Type Return Address (Optional) (For person or comp Name: Cheyenne	LLC that will be developing homes. elected or appointed	Middle Name City (no abbrevia le and correct. A T ed to this document	Last Name tions) Authorized Rep. itile Signature , or if purchasing a copy of the filed docur	 	1 1 1 the nar	ode
I will be investing in an I 8. Chief Executive Officer, if of a. First Name b. Address 9. The Information contained 12/09/2016 Cher Date Type Return Address (Optional) (For person or comp Name: Cheyenne Company: LegalZoo	LLC that will be developing homes. elected or appointed herein, including any attachments, is tru yenne Moseley e or Print Name of Person Completing the Form communication from the Secretary of State relate bany and the mailing address. This information will e Moseley	Middle Name City (no abbrevia le and correct. A T ed to this document	Last Name tions) Authorized Rep. itile Signature , or if purchasing a copy of the filed docur	 	1 1 1 the nar	ode