



**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

**LLC-12**

**22-B37693**

**FILED**

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

**MAR 03, 2022**

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**IMPORTANT** — This form can be filed online at  
[bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).

[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, [see instructions](#).)

BEACON LIGHT PRESS LLC

**2. 12-Digit Secretary of State Entity Number**

202202110121

**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
1300 South Pacific Avenue	San Pedro	CA	90731
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1300 South Pacific Avenue	San Pedro	CA	90731
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1300 South Pacific Avenue	San Pedro	<b>CA</b>	90731

**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
James		Allen	
b. Entity Name - Do not complete Item 5a			
c. Address	City (no abbreviations)	State	Zip Code
1300 South Pacific Avenue	San Pedro	CA	90731

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

**INDIVIDUAL** – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is <b>not</b> a corporation) Terelle	Middle Name Lance	Last Name Jerricks	Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> 1840 S. Gaffey St. #521	City (no abbreviations) San Pedro	State <b>CA</b>	Zip Code 90731

**CORPORATION** – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b
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**7. Type of Business**

Describe the type of business or services of the Limited Liability Company Media Management
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**8. Chief Executive Officer, if elected or appointed**

a. First Name	Middle Name	Last Name	Suffix
b. Address	City (no abbreviations)	State	Zip Code

**9. Labor Judgment**

Does a Manager or Member have an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**10.** 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.

03/03/2022

Date

Cheyenne Moseley

Type or Print Name

Asst. Sec., LegalZoom.com, Inc., OBO filing entity

Title

Signature



**Attachment to  
Statement of Information  
(Limited Liability Company)**

**LLC-12A  
Attachment**

**22-B37693**

**A. Limited Liability Company Name**

BEACON LIGHT PRESS LLC

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**B. 12-Digit Secretary of State File Number**

202202110121

**C. State or Place of Organization (only if formed outside of California)**

CALIFORNIA

**D. List of Additional Manager(s) or Member(s)** - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.

First Name Suzanne	Middle Name	Last Name Matsumiya	Suffix
Entity Name			
Address 1300 South Pacific Avenue	City (no abbreviations) San Pedro	State CA	Zip Code 90731
First Name Terrell	Middle Name	Last Name Jerricks	Suffix
Entity Name			
Address 1300 South Pacific Avenue	City (no abbreviations) San Pedro	State CA	Zip Code 90731
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code