



202464115205

B3095-9221 10/07/2024 2:07 PM Received by California Secretary of State



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**ARTICLES OF ORGANIZATION**  
**CA LIMITED LIABILITY COMPANY**  
California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 657-5448

For Office Use Only

**-FILED-**

File No.: 202464115205

Date Filed: 10/7/2024

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Limited Liability Company Name                                                                                                                                                        | Folsom Day Care LLC                                                                                                                                                                                                |
| Initial Street Address of Principal Office of LLC<br>Principal Address                                                                                                                | 1643 BALLOU CIR<br>FOLSOM, CA 95630                                                                                                                                                                                |
| Initial Mailing Address of LLC<br>Mailing Address                                                                                                                                     | 1643 BALLOU CIR<br>FOLSOM, CA 95630                                                                                                                                                                                |
| Attention                                                                                                                                                                             | Nehal Babakarkhail                                                                                                                                                                                                 |
| Agent for Service of Process<br>Agent Name                                                                                                                                            | Mohammad Mustafa                                                                                                                                                                                                   |
| Agent Address                                                                                                                                                                         | 1643 BALLOU CIR<br>FOLSOM, CA 95630                                                                                                                                                                                |
| 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<br>The LLC will be managed by                                                                                                                                    | 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                                                                                                                                                                  |                                                                                                                                                                                                                    |
| <input checked="" type="checkbox"/> 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. |                                                                                                                                                                                                                    |
| <u>Mohammad Mustafa</u><br>Organizer Signature                                                                                                                                        | <u>10/07/2024</u><br>Date                                                                                                                                                                                          |