





Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

1500 11th Street Sacramento, California 95814 (916) 657-5448

For Office Use Only

-FILED-

File No.: BA20241553778 Date Filed: 8/28/2024

	None Entered
CEO Name	CEO Address
Chief Executive Officer (CEO)	
Email Notifications Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Type of Business	Creative consulting
Type of Business	
Agent Address	1211 ALDERWOOD WAY VACAVILLE, CA 95687
Agent for Service of Process Agent Name	Shonna L. Rives
5 Snonna L. Rives	VACAVILLE, CA 95687
Manager or Member Name  + Shonna L. Rives	Manager or Member Address  1211 ALDERWOOD WAY
Manager(s) or Member(s)	
Street Address of California Office Street Address of California Office	1211 ALDERWOOD WAY VACAVILLE, CA 95687
Attention	
Mailing Address of LLC Mailing Address	1211 ALDERWOOD WAY VACAVILLE, CA 95687
Moiling Address of LLC	,
Street Address of Principal Office of LLC Principal Address	1211 ALDERWOOD WAY VACAVILLE, CA 95687
Formed In	CALIFORNIA
Entity No.	202463612043
Entity Details Limited Liability Company Name	Shonna L. Rives LLC

## Labor Judgment

No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.

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.		
Shonna L. Rives	08/28/2024	
Signature	Date	