



202464512985



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.: 202464512985 Date Filed: 11/7/2024

Limited Liability Company Name	Martin Container Designa III C
Limited Liability Company Name	Martin Castanon Designs LLC
Initial Street Address of Principal Office of LLC	
Principal Address	2141 PLATFORM PL
	OXNARD, CA 93035
Initial Mailing Address of LLC	
Mailing Address	2141 PLATFORM PL
	OXNARD, CA 93035
Attention	
Agent for Service of Process	
Agent Name	Martin Castanon
Agent Address	2141 PLATFORM PL
	OXNARD, CA 93035
	O/(W/((D), O/(30003
Purpose Statement The purpose of the limited liability company is	
The purpose of the limited liability company is	to engage in any lawful act or activity for which a limited liability nia Revised Uniform Limited Liability Company Act.
The purpose of the limited liability company is	to engage in any lawful act or activity for which a limited liability
The purpose of the limited liability company is company may be organized under the Californ	to engage in any lawful act or activity for which a limited liability
The purpose of the limited liability company is company may be organized under the Californ Management Structure The LLC will be managed by	to engage in any lawful act or activity for which a limited liability nia Revised Uniform Limited Liability Company Act.
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The purpose of the limited liability company is company may be organized under the Californ Management Structure The LLC will be managed by Additional information and signatures set forth made part of this filing. Electronic Signature By signing, I affirm under penalty of perjury to California law to sign.	to engage in any lawful act or activity for which a limited liability nia Revised Uniform Limited Liability Company Act. All LLC Member(s) on attached pages, if any, are incorporated herein by reference and that the information herein is true and correct and that I am authorized by
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