

202463810959

For Office Use Only



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

-FILED-File No.: 202463810959

Date Filed: 9/10/2024

Limited Liability Company Name	
Limited Liability Company Name	CMNO Holdings, LLC
Initial Street Address of Principal Office of LLC	
Principal Address	4342 HUNT CLUB WESTLAKE VILLAGE, CA 91361
Initial Mailing Address of LLC	
Mailing Address	4342 HUNT CLUB WESTLAKE VILLAGE, CA 91361
Attention	
Agent for Service of Process	
Agent Name	Daniel Carpio
Agent Address	854 PICO BLVD SANTA MONICA, CA 90405
Purpose Statement The purpose of the limited liability company is to engage in	
company may be organized under the California Revised U	
company may be organized under the California Revised U	
company may be organized under the California Revised U Management Structure	niform Limited Liability Company Act. All LLC Member(s)
company may be organized under the California Revised U Management Structure The LLC will be managed by Additional information and signatures set forth on attached	niform Limited Liability Company Act. All LLC Member(s)
company may be organized under the California Revised U Management Structure The LLC will be managed by Additional information and signatures set forth on attached made part of this filing.	niform Limited Liability Company Act. All LLC Member(s)
company may be organized under the California Revised U Management Structure The LLC will be managed by Additional information and signatures set forth on attached made part of this filing. Electronic Signature Mage By signing, I affirm under penalty of perjury that the inform	niform Limited Liability Company Act. All LLC Member(s) pages, if any, are incorporated herein by reference and



Business Entities Submission Cover Sheet

For fastest service, file online at <u>bizfileOnline.sos.ca.gov</u>.

Instructions:

- Complete and include this form with your paper submission. This form will not be made part of the filed document.
- Make all checks or money orders payable to the Secretary of State.
- In-person submissions (excluding Statements of Information): \$15 special handling fee. Do not include a \$15 special handling fee when submitting documents by mail.
- All submissions are reviewed in the date order of receipt, with online submissions given priority. For updated processing time information, visit <u>www.sos.ca.gov/business/be/processing-dates</u>.
- To obtain a certified copy, include certification fees with your submission.

Note: All correspondence related to your submission will be sent to the name and address on your check or money order.

Contact Person (Please ty)	be or print legibly):	
First Name: Mika	Last Name:	Marquart-Carpio
Phone Number: 480-332	2-2550 _{Email:} mi	ka.marquart@gmail.com
Entity Information (Please	type or print legibly):	
Entity Name: CMNO Ho	oldings, LLC	
Entity Number (if applicable):		
Comments:		

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Secretary of State		LLC-1						-620
Articles of Organization Limited Liability Company (LLC)								3 / / 0
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Filing Fee - \$70.00								Z 0 Z / 0 T / 6 0
Certified Copy Fee (Optional) - \$5.00								
<i>Note:</i> LLCs may have to pay minimum \$800 tax to the California Fr Board each year. For more information, go to <u>https://www.ftb.ca.gov</u>		se Tax						4 1 1
				This Space For Office Use Only				
1. Limited Liability Company Name (Must contain an LLC iden	ntifier su	uch as LLC or L.L	C. "L				-	AIM
CMNO Holdings, LLC								
2. Business Addresses								
a. Initial Street Address of Principal Office - Do not enter a P.O. Box		City (no abbreviation	ity (no abbreviations)			Zip Code		λα n≘
4342 Hunt Club Lane	'	Westlake	Vill	age	CA	913	91361	
b. Initial Mailing Address of LLC, if different than item 2a		City (no abbreviation	reviations)			Zip Cod	Zip Code	
 Service of Process (Must provide either Individual OR Corporatio INDIVIDUAL – Complete Items 3a and 3b only. Must include agent's fit 	,	ne and California	street a	address.				
a. California Agent's First Name (if agent is not a corporation)	Mi	Middle Name Last Name						μ
Daniel		Carpio						ט ת כ
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	Ci	City (no abbreviations)			State	Zip Co	de	
854 Pico Blvd	S	Santa Monica			СА	90405		,аг У
CORPORATION – Complete Item 3c. Only include the name of the re-	egistere	d agent Corporat	ion.					C
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do	o not cor	mplete Item 3a or :	3b					т Sta
4. Management (Select only one box)								, , ,
The LLC will be managed by:	Dne M	lanager	√	All LLC Me	ember(s)		
5. Purpose Statement (Do not alter Purpose Statement)								
The purpose of the limited liability company is to engage ir may be organized under the California Revised Uniform Limit					a limiteo	d liability	y company	/
 By signing, I affirm under penalty of perjury that the inform California law to sign. 	mation	n herein is true	e and	correct and	that I am	authori	zed by	
Additional signatures set forth on attached pages, if any, are incorporate should be 8 ½ x 11, one-sided, legible and clearly marked as an attachr				de part of this F	orm LLC-1	. (All attac	chments	
Mika Marquart-Carpio								

Organizer sign here

- Print your name here