



202464411905

B3153-2751 10/29/2024 11:12 AM 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.: 202464411905

Date Filed: 10/29/2024

Limited Liability Company Name	Downtown LA Carwash LLC
Initial Street Address of Principal Office of LLC Principal Address	334 S MAIN STREET #9109 LOS ANGELES, CA 90013
Initial Mailing Address of LLC Mailing Address	334 S MAIN STREET #9109 LOS ANGELES, CA 90013
Attention	BRIAN NEMAN
Agent for Service of Process Agent Name	BRIAN NEMAN
Agent Address	334 S MAIN STREET #9109 LOS ANGELES, CA 90013
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 The LLC will be managed by	More than 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>BRIAN NEMAN</u> Organizer Signature	<u>10/29/2024</u> Date



Secretary of State  
Business Programs Division

Business Entities

1500 11th Street, Sacramento, CA 95814

P.O. Box 944260, Sacramento, CA 94244-2600

## Submission Cover Sheet

### Instructions:

- Complete and include this form with your submission. **This information only will be used to communicate with you in writing about the submission.** This form will be treated as correspondence and will not be made part of the filed document.
- Make all checks or money orders payable to the Secretary of State.
- In person submissions: \$15 handling fee; do not include a \$15 handling fee when submitting documents by mail.
- Standard processing time for submissions to this office is approximately 5 business days from receipt. All submissions are reviewed in the date order of receipt. For updated processing time information, visit [www.sos.ca.gov/business/be/processing-dates](http://www.sos.ca.gov/business/be/processing-dates).

### Optional Copy and Certification Fees:

- If applicable, include optional copy and certification fees with your submission.
- For applicable copy and certification fee information, refer to the instructions of the specific form you are submitting.

### Contact Person: (Please type or print legibly)

First Name: BRIAN Last Name: NEMAN

Phone (optional): 213-765-7700

### Entity Information: (Please type or print legibly)

Name: Downtown LA Carwash LLC

Entity Number (if applicable): \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Return Address:** For written communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address.

Name: BRIAN NEMAN

Company: Downtown LA Carwash LLC

Address: 334 S MAIN STREET # 9109

City/State/Zip: LOS ANGELES CA 90013

Secretary of State Use Only	
T/TR:	
AMT REC'D:	\$



**Secretary of State**  
**Articles of Organization**  
 Limited Liability Company (LLC)

LLC-1

**IMPORTANT — Read Instructions** before completing this form.

**Filing Fee** - \$70.00

**Copy Fees** - First page \$1.00; each attachment page \$0.50;  
 Certification Fee - \$5.00

*Note:* LLCs may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov>.

**This Space For Office Use Only**

**1. Limited Liability Company Name** (See Instructions — Must contain an LLC identifier such as LLC or L.L.C. "LLC" will be added, if not included.)

**Downtown LA Carwash LLC**

**2. Business Addresses**

a. Initial Street Address of Designated Office in California - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
<b>334 S MAIN STREET # 9109</b>	<b>LOS ANGELES</b>	<b>CA</b>	<b>90013</b>
b. Initial Mailing Address of LLC, if different than item 2a	City (no abbreviations)	State	Zip Code

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

**INDIVIDUAL** — Complete Items 3a and 3b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
<b>BRIAN</b>		<b>NEMAN</b>	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
<b>334 S MAIN STREET # 9109</b>	<b>LOS ANGELES</b>	<b>CA</b>	<b>90013</b>

**CORPORATION** — Complete Item 3c. 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 3a or 3b

**4. Management** (Select only one box)

The LLC will be managed by:

☐ One Manager

☒ More than One Manager

☐ All LLC Member(s)

**5. Purpose Statement** (Do not alter 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.

**6. 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.**

Additional signatures set forth on attached pages, if any, are incorporated herein by reference and made part of this Form LLC-1. (All attachments should be 8 1/2 x 11, one-sided, legible and clearly marked as an attachment to this Form LLC-1.)

Organizer sign here

**BRIAN NEMAN**

Print your name here