Secretary of State	l	_LC-12	20-A58659			
(Limited Liability Company)			FILED			
IMPORTANT — Read instructions before completing this form.			In the office of the Secretary of State of the State of California			
Filing Fee – \$20.00						
			FEB 05, 2020			
<b>Copy Fees</b> – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees			This Space For Office Use Only			
1. Limited Liability Company Name (Enter the exact name of the I	LLC. If you r	registered in Califor			,, <u>,</u>	
PARABOLA COFFEE ROASTING CO., LLC						
2. 12-Digit Secretary of State File Number	3. State,	Foreign Countr	y or Place of Organization (only if for	rmed out	side of C	California)
201804610601	CALIF	ORNIA				
4. Business Addresses						
a. Street Address of Principal Office - Do not list a P.O. Box 4051 30th Street		City (no abbreviat			Zip Co 9210	
ailing Address of LLC, if different than item 4a		City (no abbreviations)		CA State	Zip Co	
051 30th Street		San Diego City (no abbreviations)		CA State	9210	
c. Street Address of <b>California</b> Office, if Item 4a is not in California - Do not list a P.O. Box 4051 30th Street		San Diego	no abbreviations) Diego		e Zip Code 92104	
5. Manager(s) or Member(s) must be listed. If the manager/mentary an entity, complete Items 5b and 5	mber is an ii 5c (leave Iter	ndividual, complete m 5a blank). Note:	ne and address of each <b>member</b> . At lea Items 5a and 5c (leave Item 5b blank). The LLC cannot serve as its own manages ses on Form LLC-12A (see instructions).	If the ma	nager/m	ember is
a. First Name, if an individual - Do not complete Item 5b Victor		Middle Name	Last Name Morales			Suffix
b. Entity Name - Do not complete Item 5a						
c. Address 4051 30th Street		City (no abbreviat	City (no abbreviations) San Diego		State Zip Code CA 92104	
6. Service of Process (Must provide either Individual OR Corporatio	n.)					
INDIVIDUAL - Complete Items 6a and 6b only. Must include agent's	s full name a	1				
California Agent's First Name (if agent is <b>not</b> a corporation)		Middle Name	Last Name Morales			Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> 4051 30th Street		City (no abbreviat	ions)	State CA	Zip Co 921	
CORPORATION - Complete Item 6c only. Only include the name of	f the register	ed agent Corporation	on.			
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do	o not complete	e Item 6a or 6b				
7. Type of Business a. Describe the type of business or services of the Limited Liability Company						
Coffee Roaster						
8. Chief Executive Officer, if elected or appointed						
a. First Name Victor		Middle Name	Last Name Morales			Suffix
b. Address 4051 30th Street		City (no abbreviat San Diego	ions)	State Zip Code CA 92104		
9. The Information contained herein, including any attachme	ents, is tru	e and correct.		•	•	
02/05/2020 Victor Morales		F	Founder			
Date Type or Print Name of Person Completing the	e Form		Title Signature	9		
Return Address (Optional) (For communication from the Secretary of	f State relate		, or if purchasing a copy of the filed docu		er the n	ame of a
person or company and the mailing address. This information will become p	oublic when fi	ied. SEE INSTRU(	CTIONS BEFORE COMPLETING.)			
lame:		I				
Company:						
Address:						
City/State/Zip:						