| | | | For Office Use Only | | | |
|--|--|--------------------------|------------------------|--------------|--------------|--|
| | | | -FILED- | | - | |
| Secretary of State | LLC-1 | | | | | |
| Articles of Organization | | | File No.: 202465110506 | | | |
| Limited Liability Company (LLC) | İ | Date Filed: 12/23/2024 | | | | |
| 4 (FORM) | | | | | | |
| | | | | | | |
| Filing Fee - \$70.00 | | | | | | |
| Certified Copy Fee (Optional) - \$5.00 | | | | | | |
| Note: LLCs may have to pay minimum \$800 tax to the California Fran Board each year. For more information, go to https://www.ftb.ca.gov/ . | nchise Tax | | | | | |
| | | This Spa | ace For Of | fice Use C | nly | |
| 1. Limited Liability Company Name (Must contain an LLC identifi | er such as LLC or L.L.C. | "LLC" will be add | led, if not inc | luded.) | | |
| Angel Homes Care LLC | | | | | | |
| 2. Business Addresses | | | | | | |
| a. Initial Street Address of Principal Office - Do not enter a P.O. Box | City (no abbreviations) | | State | Zip Coda | | |
| 2740 Fulton Ave ST 122 | Sacramento | | CA | 95821 | | |
| b. Initial Mailing Address of LLC, if different than item 2a | City (no abbreviations) | | State | Zip Code | | |
| 2740 Fulton Ave ST 122 | Sacramento | | CA | 95821 | | |
| 3. Service of Process (Must provide either Individual OR Corporation. | } | | | <u> </u> | | |
| INDIVIDUAL - Complete Items 3a and 3b only. Must include agent's full | name and California stre | et address. | | | | |
| a. California Agent's First Name (if agent is not a corporation) | Middle Name Last Name | | Suffix | | | |
| Angela | 50% | | .40 | | | |
| | City (no abbreviations) | | State | Zip Code | | |
| 2746 tulton Ave 51,122 | Saramenta | | CA | 45821 | | |
| CORPORATION - Complete Item 3c. Only include the name of the regis | stered agent Corporation. | | , 0,, | 1 1- | | |
| c. California Registered Corporate Agent's Name (if agent is a corporation) - Do no | ot complete Item 3a or 3b | | -11- | | | |
| | | | | | | |
| 4. Management (Select only one box) | | | | | | |
| | | | · | | | |
| The LLC will be managed by: | | | , , | | | |
| One Manager More than On | e Manager | All LLC M | lember(s) | | | |
| 5. Purpose Statement (Do not alter Purpose Statement) · . | | | , , , | | | |
| The purpose of the limited liability company is to engage in a may be organized under the California Revised Uniform Limite | any lawful act or ac ed Liability Company | tivity for which Act. | n a limited | liability o | company | |
| By signing, I affirm under penalty of perjury that the information California law to sign. | ition herein is true a | nd correct and | that I am | authorize | d by | |
| Additional signatures set forth on attached pages, if any, are incorporated should be 8 ½ x 11, one-sided, legible and clearly marked as an attachme | | made part of this | Form LLC-1. | (All attachm | nents | |

Organizer sign here