

LIMITED LIABILITY COMPANY QUESTIONNAIRE

Instructions: An individual managing member or designee may sign on behalf of the limited liability company. Attach a copy of original operating agreement and all amendments.

1. LIMITED LIABILITY COMPANY NAME		2. TELEPHONE NUMBER	
3. PREMISES ADDRESS <small>(Street number and name, city, zip code)</small>			
4. COMPANY HEADQUARTERS ADDRESS <small>(Street number and name, city, state, zip code)</small>		5. HEADQUARTERS TELEPHONE NUMBER	
6. COMPANY ATTORNEY'S NAME		7. ATTORNEY'S TELEPHONE NUMBER	
8. COMPANY ATTORNEY'S ADDRESS <small>(Street number and name, city, state, zip code)</small>			
9. DATE LLC-1 FILED WITH SECRETARY OF STATE	10. STATE WHERE LLC-1 FILED WITH SECRETARY OF STATE	11. STATE WHERE LLC FORMED	12. ARTICLES OF ORGANIZATION (LLC-2 OR LLC-10) HAS BEEN AMENDED <input type="checkbox"/> YES <input type="checkbox"/> NO
13. OPERATING AGREEMENT DATE		14. LAST AMENDMENT DATE	

15. The Limited Liability Company will be managed by (check one)

One Manager
 More than one Manager
 Members
 Single Member

16. NAME OF MANAGER(S)

MANAGER PRINTED NAME	MANAGER PRINTED NAME
MANAGER PRINTED NAME	MANAGER PRINTED NAME

17. NAME OF OFFICERS AUTHORIZED BY ARTICLES OR AGREEMENT

OFFICER PRINTED NAME	OFFICER PRINTED NAME
OFFICER PRINTED NAME	OFFICER PRINTED NAME

18. LIST ALL MEMBERS

MEMBER'S PRINTED NAME	PERCENTAGE OF OWNERSHIP	EFFECTIVE DATE
MEMBER'S PRINTED NAME	PERCENTAGE OF OWNERSHIP	EFFECTIVE DATE
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I hereby certify that the above are the present managers, officers, and members of the limited liability company and that each such manager, officer, and member is the real party in interest with respect to his or her position and is not acting, directly or indirectly as an agent, employee or representative of any other person not reported to the Department. The provisions of sections 23405.2 and 23405.3 of the Business and Professions Code are hereby acknowledged. It is understood that changes within the limited liability company and/or its entities holding interest in the limited liability company will be reported to the Department and a fee may be required pursuant to Sections 24071.1 & 24072 B&P.

19. SIGNATURE OF MANAGER OR DESIGNEE	PRINTED NAME	DATE SIGNED
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ADDITIONAL NAMES *(if needed)*

MEMBER'S PRINTED NAME	PERCENTAGE OF OWNERSHIP	EFFECTIVE DATE
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