Attachment to Statement of Information (Limited Liability Company)	LLC-12A Attachment	
A. Limited Liability Company Name (Enter the exact name Secretary of State.)	on file w ith the California	
		Above Space For Office Use Only
B. Secretary of State Entity (File) Number	C. State, Foreign C California)	Country, or Place of Organization (only if formed out

Above Space For Office Use Only

D. List of Additional Manager(s) or Member(s) - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.

2a. First Name-Do not complete Item 2b	Middle Name	Last Name		Suffix				
2b. Entity Name – Do not complete Item 2a								
2c. Address	City (no abbreviations)	City (no abbreviations) State		Zip Code				
3a. First Name - Do not complete Item 3b	Middle Name	Last Name		Suffix				
3b. Entity Name – Do not complete Item 3a								
3c. Address	City (no abbreviations)		State	Zip Code				
4a. First Name-Do not complete Item 4b	Middle Name	Last Name	I	Suffix				
4b. Entity Name – Do not complete Item 4a				I				
4c. Address	City (no abbreviations)	City (no abbreviations) State		Zip Code				
5a. First Name-Do not complete Item 5b	Middle Name	Last Name		Suffix				
5b. Entity Name – Do not complete Item 5a	•			L				
5c. Address	City (no abbreviations)	City (no abbreviations) State		Zip Code				
6a. First Name-Do not complete Item 6b	Middle Name	Last Name		Suffix				
6b. Entity Name – Do not complete Item 6a	·	÷						
6c. Address	City (no abbreviations)		State	Zip Code				
7a. First Name-Do not complete Item 7b	Middle Name	Last Name		Suffix				
7b. Entity Name – Do not complete Item 7a				I				
7c. Address	City (no abbreviations)	City (no abbreviations) State Z		Zip Code				
8a. First Name-Do not complete Item 8b	Middle Name	Last Name	ł	Suffix				
8b. Entity Name – Do not complete Item 8a								
8c. Address	City (no abbreviations)		State	Zip Code				