



State of California
Secretary of State

137
bhs

STATEMENT OF INFORMATION
(Limited Liability Company)

Filing Fee \$20.00. If this is an amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY NAME

1210 Olive St, LLC.

FILED

Secretary of State
State of California

JAN 15 2015

This Space For Filing Use Only

File Number and State or Place of Organization

SECRETARY OF STATE FILE NUMBER

201501510180

3 STATE OR PLACE OF ORGANIZATION (If formed outside of California)

Do Change Statement

If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no Statement of Information has been previously filed, this form must be completed in its entirety.

☐ If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 15.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 5 and 7 cannot be P.O. Boxes.)

STREET ADDRESS OF PRINCIPAL OFFICE

7668 El Camino Real, Suite 104-809

CITY

Carlsbad,

CA

STATE

ZIP CODE

92009

MAILING ADDRESS OF LLC, IF DIFFERENT THAN ITEM 5

CITY

STATE

ZIP CODE

STREET ADDRESS OF CALIFORNIA OFFICE

7668 El Camino Real, Suite 104-809

CITY

Carlsbad

STATE

CA

ZIP CODE

92009

Name and Complete Address of the Chief Executive Officer, If Any

NAME

ADDRESS

CITY

STATE

ZIP CODE

Name and Complete Address of Any Manager or Managers, or If None Have Been Appointed or Elected, Provide the Name and Address of Each Member (Attach additional pages, if necessary.)

NAME

Stephen Lake

ADDRESS

3537 Dove Hollow Road

CITY

Encinitas,

CA

STATE

ZIP CODE

92024

2. NAME

ADDRESS

CITY

STATE

ZIP CODE

3. NAME

ADDRESS

CITY

STATE

ZIP CODE

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California address, a P.O. Box is not acceptable. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.

4. NAME OF AGENT FOR SERVICE OF PROCESS
T Corporation Services

C01168406

See Secretary of State's
records for exact entity name.

5. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

CA

Type of Business

1. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY
Real Estate Investment

6. THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

12/29/14

Stephen Lake

DATE

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

TITLE

SIGNATURE