

LLC-1

Articles of Organization of a Limited Liability Company (LLC)

201803710465

To form a limited liability company in California, you can fill out this form, and submit for filing along with:

- A \$70 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

Important! LLCs in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to http://www.ftb.ca.gov.

LLCs may not provide "professional services," as defined by California Corporations Code sections 13401(a) and 13401.3.

Note: Before submitting the completed form, you should consult with a private attorney for advice about your specific business needs.

FILED
Secretary of State
State of California
JAN 22 2018

JAM

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For questions about this form, go to www.sos.ca.gov/business/be/filing-tips.htm.

LLC Name (List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State.)

1 Sure Felt LLC

Proposed LLC Name

The name must include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company; and may not include: bank, trust, trustee, incorporated, inc., corporation, or corp., insurer, or insurance company. For general entity name requirements and restrictions, go to www.sos.ca.gov/business/be/name-availability.htm.

Purpose

2 The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

LLC Addresses

3 a. 5445 55th St. Apt. 3D San Diego CA 92115
Initial Street Address of Designated Office in CA - Do not list a P.O. Box City (no abbreviations) State Zip

b. Initial Mailing Address of LLC, if different from 3a City (no abbreviations) State Zip

Service of Process (List a California resident or a California registered corporate agent that agrees to be your initial agent to accept service of process in case your LLC is sued. You may list any adult who lives in California. You may not list an LLC as the agent. Do not list an address if the agent is a California registered corporate agent as the address for service of process is already on file.)

4 a. Belinda Smith

Agent's Name

b. 5445 55th St. Apt. 3D San Diego CA 92115
Agent's Street Address (if agent is not a corporation) - Do not list a P.O. Box City (no abbreviations) State Zip

Management (Check only one.)

5 The LLC will be managed by:

- One Manager
More Than One Manager
All Limited Liability Company Member(s)

This form must be signed by each organizer. If you need more space, attach extra pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All attachments are made part of these articles of organization.

Belinda Smith
Organizer - Sign here

Belinda Smith
Print your name here

Make check/money order payable to: Secretary of State
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

By Mail
Secretary of State
Business Entities, P.O. Box 944228
Sacramento, CA 94244-2280

Drop-Off
Secretary of State
1500 11th Street., 3rd Floor
Sacramento, CA 95814



**Secretary of State
Amendment to Articles of
Organization of a
Limited Liability Company (LLC)**

LLC-2

*cap
TLP*

FILED
Secretary of State
State of California

DEC 28 2018

1 CC

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IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First page \$1.00; each attachment page \$0.50;
Certification Fee - \$5.00

Note: You must file a Statement of Information (Form LLC-12), to change the business address(es) of the LLC or to change the name or address of the LLC's manager(s) and/or agent for service of process, which can be filed online at bizfile.sos.ca.gov.

1. LLC Exact Name (Enter the exact name on file with the California Secretary of State.)

Sure Felt, LLC

2. LLC 12-Digit Entity (File) Number (Enter the exact 12-digit Entity (File) Number issued by the California Secretary of State.)

2	0	1	8	0	3	7	1	0	4	6	5
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3. New LLC Name (If Amending) (See Instructions – List the proposed LLC name exactly as it is to appear on the records of the California Secretary of State. The name must contain an LLC identifier such as LLC or L.L.C. "LLC" will be added, if not included.)

4. Management (If Amending) (Select only one box)

The LLC will be managed by:

One Manager More than One Manager All LLC Member(s)

5. Purpose Statement (Do not alter Purpose Statement.)

The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the California Revised Uniform Limited Liability Company Act.

6. Additional Amendment(s) set forth on attached pages, if any, are incorporated herein by reference and made part of this Form LLC-2. (All attachments should be 8½ x 11, one-sided, legible and clearly marked as an attachment to this form LLC-2.)

Signature

By signing, I certify that the information is true and correct and that I am authorized by California law to sign.

D Edwards

Sign here

Dan Edwards

Print your name here



Secretary of State
Statement of Information
 (Limited Liability Company)

LLC-12

22-A06854

FILED

In the office of the Secretary of State
 of the State of California

JAN 05, 2022

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IMPORTANT — This form can be filed online at
bizfile.sos.ca.gov.

[Read instructions](#) before completing this form.

Filing Fee - \$20.00

Copy Fees - First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the **exact** name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

SURE FELT LLC

2. 12-Digit Secretary of State Entity Number

201803710465

3. State, Foreign Country or Place of Organization (only if formed outside of California)

CALIFORNIA

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
10715 SORRENTO BLVD.	SAN DIEGO	CA	92121
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
10115 JEFFERSON BLVD	CULVER CITY	CA	90232
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
10715 SORRENTO BLVD.	SAN DIEGO	CA	92121

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an additional managers/members, enter the names(s) and address(es) on [Form LLC-12A](#).

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
b. Entity Name - Do not complete Item 5a MM Enterprises USA, LLC			
c. Address	City (no abbreviations)	State	Zip Code
10115 JEFFERSON BLVD	CULVER CITY	CA	90232

6. Service of Process (Must provide either Individual **OR** Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State CA	Zip Code

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b CORPORATION SERVICE COMPANY WHICH WILL DO BUSINESS IN CALIFORNIA AS CSC - LAWYERS INCORPORATING SERVICE (C1592199)

7. Type of Business

Describe the type of business or services of the Limited Liability Company Retail Sales
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8. Chief Executive Officer, if elected or appointed

a. First Name	Middle Name	Last Name	Suffix
b. Address	City (no abbreviations)	State	Zip Code

9. Labor Judgment

Does a Manager or Member have an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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10. By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

01/05/2022

Date

Dan Edwards

Type or Print Name

Authorized Signatory

Title

Signature



BA20240576799



STATE OF CALIFORNIA
Office of the Secretary of State
STATEMENT OF INFORMATION
LIMITED LIABILITY COMPANY

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20240576799

Date Filed: 3/28/2024

B2618-8591 03/28/2024 10:30 AM Received by California Secretary of State

Entity Details					
Limited Liability Company Name	SURE FELT LLC				
Entity No.	201803710465				
Formed In	CALIFORNIA				
Street Address of Principal Office of LLC					
Principal Address	10715 SORRENTO BLVD. SAN DIEGO, CA 92121				
Mailing Address of LLC					
Mailing Address	10115 JEFFERSON BLVD CULVER CITY, CA 90232				
Attention					
Street Address of California Office of LLC					
Street Address of California Office	10715 SORRENTO BLVD. SAN DIEGO, CA 92121				
Manager(s) or Member(s)					
<table border="1"> <thead> <tr> <th>Manager or Member Name</th> <th>Manager or Member Address</th> </tr> </thead> <tbody> <tr> <td>MM Enterprises USA, LLC</td> <td>10115 JEFFERSON BLVD CULVER CITY, CA 90232</td> </tr> </tbody> </table>		Manager or Member Name	Manager or Member Address	MM Enterprises USA, LLC	10115 JEFFERSON BLVD CULVER CITY, CA 90232
Manager or Member Name	Manager or Member Address				
MM Enterprises USA, LLC	10115 JEFFERSON BLVD CULVER CITY, CA 90232				
Agent for Service of Process					
California Registered Corporate Agent (1505)	CSC - LAWYERS INCORPORATING SERVICE Registered Corporate 1505 Agent				
Type of Business					
Type of Business	RETAIL SALES				
Email Notifications					
Opt-in Email Notifications	Yes, I opt-in to receive entity notifications via email.				
Chief Executive Officer (CEO)					
<table border="1"> <thead> <tr> <th>CEO Name</th> <th>CEO Address</th> </tr> </thead> <tbody> <tr> <td>+ Richard Ormond</td> <td>10115 JEFFERSON BLVD CULVER CITY, CA 91505</td> </tr> </tbody> </table>		CEO Name	CEO Address	+ Richard Ormond	10115 JEFFERSON BLVD CULVER CITY, CA 91505
CEO Name	CEO Address				
+ Richard Ormond	10115 JEFFERSON BLVD CULVER CITY, CA 91505				
Labor Judgment					
No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.					

Electronic Signature

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

Richard Ormond

03/28/2024

Signature

Date



BA20242246962



STATE OF CALIFORNIA
Office of the Secretary of State
RESIGNATION OF AGENT FOR SERVICE OF PROCESS

California Secretary of State
1500 11th Street
Sacramento, California 95814
(916) 657-5448

For Office Use Only

-FILED-

File No.: BA20242246962

Date Filed: 12/23/2024

B3289-4778 12/23/2024 8:03 AM Received by California Secretary of State

Entity Details	
Entity Name	SURE FELT LLC
Entity No.	201803710465
Resigning Agent for Service of Process	
California Registered Corporate Agent (1505)	CSC - LAWYERS INCORPORATING SERVICE Registered Corporate 1505 Agent
<input checked="" type="checkbox"/> I confirm that I am an authorized representative of the Agent for Service of Process for the above listed entity.	
Statement of Resignation	
The undersigned hereby resigns as agent upon whom process may be served in California for the above named entity.	
Electronic Signature	
<input checked="" type="checkbox"/> I declare I am the person who signed this document, which execution is my act and deed.	
<u>JEANNETTE JONES</u>	<u>12/23/2024</u>
Signature of Authorized Representative of Resigning Agent for Service of Process	Date