## LLC-1

## Articles of Organization of a Limited Liability Company (LLC)

201301010047

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 or document.

**Important!** LLCs in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board For more information, go to https://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 AV Secretary of State // State of California JAN 0.9 2013

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	For question	s about this form, go	o to www.sos.ca.gov/business/be/filing-	tıps.htm.	
LC N	ame				
1	Machine Zone LLC				
	Proposed LLC Name	Liability Co." or "Ltd Lia "inc.," "corporation," or	with: "LLC," "LL C.," "Limited Liability Company ability Company," and may not include: "bank," "t r "corp." "insurer," or "insurence company ctions, go to www sos ca gov/business/be/name-i	rust," "trustee " For gene	e," "incorporated," eral entity name
ırpo	se				•••
2			to engage in any lawful act or activity f Killea Limited Liability Company Act	or which a	limited llability
.C A	ddresses				
3	a. 555 Hamilton Avenue, Palo Alto, CA 94301				
•	Initial Street Address of LL	<del></del>	City (no abbreviations)	State	Zip
	b				
	b. Initial Mailing Address of Li	.C, if different from 3a	City (no abbreviations)	State	Zip
<b>④</b>	a. Ed Lu  Agent's Name  b 555 Hamilton Avenue, Palo Alto			CA 94301	
	Agent's Street Address (if agent is not a corporation)  City (no abbreviations)			State	
	jement (Check only one )				
(3)	The LLC will be managed	by:			
	✓ One Manager	More Than One	Manager All Limited Liability C	ompany M	lember(s)
us for iper (t	m must be signed by each on 8 1/2" x 11"). All attachments a	ganizer If you need mor are made part of these arti	re space, attach extra pages that are 1-sided icles of organization	and on sta	ndard letter-size
	A	E	Ed Lu		
Orga	nizer - Sign here		Pnnt your name here	<del></del>	
ake cl	heck/money order payable to: \$	Secretary of State	By Mall	E	)rop-Off
pon fil	ling, we will return one (1) unce ent for free, and will certify the c nt of a \$5 certification fee	rtified copy of your filed	Secretary of State Business Entrities, P.O. Box 944260 Sacramento, CA 94244-2600	1500 11th	tary of State Street , 3rd Floo ento, CA 95814