Limited Liability Company (LLC) Statement of Members
(Government Code Section 84109)

1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY: Far West Restaurant Group, LLC
NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Jorge Ortiz
PRINCIPAL/RESPONSIBLE OFFICER PHONE #: 415-389-6800
PRINCIPAL/RESPONSIBLE OFFICER EMAIL: form410@nmgovlaw.com

LLC STREET ADDRESS: 1675 Scenic Ave., Suite 150
CITY: Costa Mesa
STATE: CA
ZIP CODE: 92626

NAME OF COMMITTEE: Far West Restaurant Group, LLC
COMMITTEE ID: not yet assigned
COMMITTEE PHONE NUMBER: 415-389-6800
COMMITTEE EMAIL ADDRESS: form410@nmgovlaw.com

COMMITTEE STREET ADDRESS: 1675 Scenic Ave., Suite 150
CITY: Costa Mesa
STATE: CA
ZIP CODE: 92626

2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

<table>
<thead>
<tr>
<th>FULL NAME</th>
<th>MEMBERSHIP TYPE</th>
<th>DATE(S) OF CAPITAL CONTRIBUTION</th>
<th>CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC</th>
<th>PERCENTAGE OWNERSHIP INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Far West Services, LLC</td>
<td>MEMBERSHIP 10% OR GREATER</td>
<td></td>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

3. Names of Member LLCs Listed in Part 2

<table>
<thead>
<tr>
<th>NAME OF LLC LISTED IN PART 2</th>
<th>FULL NAMES OF MEMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Far West Services, LLC</td>
<td>CSIP V Pass-Through Acquisitions, LP and The Daniel and Kerri Sonenshine Family Trust</td>
</tr>
</tbody>
</table>

4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11/15/2022

By ____________________________

SIGNATURE

Attach additional information on appropriately labeled continuation sheets.