Limited	Liability	Company	(LLC)
Stateme	ent of Me	mbers	

(Government Code Section 84109)

Type or Print in Ink.

Amendment  Check box if an Amendment		Date Stamp	CALIFORNIA 409			
	3 / 22 / 22		For Official Use Only			
Date qualification threshold met (Month, Day, Year)						

			Date	(Month, Day						
I. LLC Information					<u>'</u>		<u> </u>			
	F RESPONSIBLE OFFIC William W		IPAL OFFIC	ı	L/RESPONSIBLE OFFIC 660-7272	ER PHON		RESPONSIBLE aufmanlegalg		
LLC STREET ADDESS: CITY 18201 Von Karman Ave. Irvi			CODE: LI	LC MAILING A	DDESS (IF DIFFERENT)	:	CITY:	STATE:	ZIP CODE:	
NAME OF COMMITTEE: Related Companies of California, The / William			соммітті 499213	EE ID:	(949) 660-7272		: COMMITTEE EMAIL ADDRESS: jguard@kaufmanlegalgroup.com			
COMMITTEE STREET ADDESS: CITY 18201 Von Karman Ave. Sac	ramento C		CODE: C	OMMITTEE MA	AILING ADDESS (IF DIF	FERENT):	CITY:	STATE:	ZIP CODE:	
2. <b>Members</b> (If any members are other LLC	s, further disclos	sure is rec	uired in							
FULL NAME	МЕМВЕ	RSHIP TYPE		DATE(S) OF (ONLY COME	CAPITAL CONTRIBUTION PLETE IF MEMBER HAS MET ONTRIBUTION THRESHOLD)	CON-	MULATIVE CAPITA	AL PE	PERCENTAGE OWNERSHIP INTEREST	
William Witte					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TIKESHOLD)		25		
Francis Cardone				E				25		
The Related Companies, L.P.				Ε				50		
	☐ MEMBERSHIP 10% ☐ CAPITAL CONTRIB			Ε						
Names of Member LLCs Listed in Part 2										
NAME OF LLC LISTED IN PART 2			FULL NAMES OF MEMBERS							
I. Verification	0.1.		<u> </u>							

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 statement. California that the foregoing is true and correct.

08/01/2022 Executed on \_

SIGNATURE

FPPC Form 409 (Nov/2021) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)