

# Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

<p><b>Amendment</b></p> <p><input type="checkbox"/> Check box if an Amendment</p> <p style="text-align: center;">3 / 29 / 22</p> <p># _____</p> <p>Date qualification threshold met (Month, Day, Year)</p>	<p>Date Stamp</p>	<p><b>CALIFORNIA FORM 409</b></p> <p>For Official Use Only</p>
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## 1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY: Buzz Oates, LLC	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Larry Allbaugh	PRINCIPAL/RESPONSIBLE OFFICER PHONE #: (916) 379-3800	PRINCIPAL/RESPONSIBLE OFFICER EMAIL: larryallbaugh@buzzoates.com
LLC STREET ADDRESS: 555 Capitol Mall, Suite 900	CITY: Sacramento	STATE: CA	ZIP CODE: 95814
NAME OF COMMITTEE: Buzz Oates LLC, including Larry Allbaugh and affiliated entities		COMMITTEE ID: 1434702	COMMITTEE PHONE NUMBER: (916) 379-3800
COMMITTEE STREET ADDRESS: 555 Capitol Mall, Suite 900		CITY: Sacramento	STATE: CA

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

FULL NAME	MEMBERSHIP TYPE	DATE(S) OF CAPITAL CONTRIBUTION <small>(ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)</small>	CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC	PERCENTAGE OWNERSHIP INTEREST
Phillip D. Oates Irrev Trust dtd Dec 16, 2009	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			25%
Kathryn Oates-Fairrington Irrev Trust dtd Dec 16, 2009	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			25%
Marvilyn E. Applegate Irrev Trust dtd Dec 19, 2009	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			25%
Judy Oates-Holt Irrev Trust dtd Dec 16, 2009	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			25%

## 3. Names of Member LLCs Listed in Part 2

NAME OF LLC LISTED IN PART 2	FULL NAMES OF MEMBERS

## 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 03/31/2022 DATE  
By  SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

**Print**      **Clear**