

**Limited Liability Company (LLC)
Statement of Members**

(Government Code Section 84109)

Type or Print in Ink.

Amendment <input type="checkbox"/> Check box if an Amendment # <u>05 / 05 / 22</u> Date qualification threshold met (Month, Day, Year)	Date Stamp	CALIFORNIA FORM 409
		For Official Use Only

1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY: Conant Automotive Resources, LLC	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Shannon Townley	PRINCIPAL/RESPONSIBLE OFFICER PHONE #: (562) 809-3705	PRINCIPAL/RESPONSIBLE OFFICER EMAIL: shannon.townley@normreeves.com
LLC STREET ADDRESS: 20322 SW Acacia Street, Ste 100	CITY: Newport Beach	STATE: CA	ZIP CODE: 92660
LLC MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:
NAME OF COMMITTEE: Conant, David and affiliated entities	COMMITTEE ID: 1259426	COMMITTEE PHONE NUMBER: (562) 809-3705	COMMITTEE EMAIL ADDRESS: shannon.townley@normreeves.com
COMMITTEE STREET ADDRESS: 20322 SW Acacia Street, Ste 100	CITY: Newport Beach	STATE: CA	ZIP CODE: 92660
COMMITTEE MAILING ADDRESS (IF DIFFERENT):	CITY:	STATE:	ZIP CODE:

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
David M Conant	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			52%
Taylor B Conant	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			48%
	<input type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			
	<input type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			

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 _____ DATE
 By Shannon Townley (Jul 28, 2022 13:36 PDT) SIGNATURE

Attach additional information on appropriately labeled continuation sheets.




Form_409 Conant

Final Audit Report

2022-07-28

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