

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

(Government Code Section 84109)

Type or Print in Ink.

<p>Amendment</p> <p><input type="checkbox"/> Check box if an Amendment</p> <p style="text-align: center;"># <u>3 / 16 / 22</u></p> <p>Date qualification threshold met (Month, Day, Year)</p>	<p>Date Stamp</p>	<p>CALIFORNIA FORM 409</p> <p>For Official Use Only</p>
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1. LLC Information

LEGAL NAME OF LIMITED LIABILITY COMPANY: La Playa LLC		NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: David Malcolm		PRINCIPAL/RESPONSIBLE OFFICER PHONE #: 858-694-2600		PRINCIPAL/RESPONSIBLE OFFICER EMAIL: malcolm.dave@gmail.com	
LLC STREET ADDRESS: 4627 Ruffner Street		CITY: San Diego	STATE: CA	ZIP CODE: 92111	LLC MAILING ADDRESS (IF DIFFERENT):		CITY: STATE: ZIP CODE:
NAME OF COMMITTEE: San Diegans for Tax Fairness Supporting Jordan Marks for Assessor 2022				COMMITTEE ID: 1445545	COMMITTEE PHONE NUMBER: 619-708-9744	COMMITTEE EMAIL ADDRESS: nancy@haleyandcompany.com	
COMMITTEE STREET ADDRESS: 374 No Coast Hwy 101 Suite 2		CITY: Encinitas	STATE: CA	ZIP CODE: 92024	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
Dianne Bashor	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			100%
	<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			
	<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 05/05/2022
DATE

By _____
SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

Print
Clear