Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

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Type	or	Print	in	Inl

Amendment	Date Stamp	CALIEODNIA 4
Check box if an Amendment		FORM 409
#9 / 24		For Official Use Only
Date qualification threshold met (Month, Day, Year)		

						Date o	qualifica (Month		reshold met Year)						
	LLC Information														
	LEGAL NAME OF LIMITED LIABILITY COMPANY:	NAME OF	RESPONSIBL	E OFFICER OR F	PRINCIP	PAL OFFICE	R: PRIN	NCIPAI	L/RESPONSIBLE	OFFICER	PHONE	#: PRINCIPAI	L/RESPO	NSIBLE OF	FICER EMAII
	MCLP, LLC	Derek F	Raynor			(408)3			354-4200			draynor@vasonamanagement.c			
	LLC STREET ADDRESS:	CITY:		STATE:	ZIP (CODE: LL	C MAILIN	IG ADI	DRESS (IF DIFF	ERENT):		CITY:		STATE:	ZIP CODE
	1500 E Hamilton Ave. Suite 210	Can	npbell	CA	95	800									
	NAME OF COMMITTEE:					COMMITTEE ID: COMMITTEE PHONE N			HONE NUI	IUMBER: COMMITTEE EMAIL ADDRESS:					
	VASONA MANAGEMENT, INC.				1	1394847			(408) 354-4200			fppc@bmhlaw.com			
	COMMITTEE STREET ADDRESS:	CITY:		STATE:	ZIP (CODE: CC	MMITTE	EE MA	ILING ADDRES	S (IF DIFF	ERENT)	: CITY:		STATE:	ZIP CODE
	1500 E Hamilton Ave. Suite 210	Can	npbell	CA	95	008									
. Members (If any members are other LLCs, further disclosure is required in Part 3.)															
	FULL NAME MEMBERSHIP TYPE				YPE									ERCENTAGE ERSHIP INTERES	
	Terry Maas Separate Trust	MEMBERSHIP 10% OR GREATE								30.7			769%		
	CAPITAL CONTRIBUTIONS \$10,00				\$10,000	OR MORE							30.70370		
	Chris Maas 2020 Trust		MEMBERSHIP 10% OR GREATER								15			384%	
	☐ CAPITAL CONTRIBUTIONS \$10,00														
	Lorenzo Exit, LLC	prenzo Exit, LLC												46.155%	
	CAPITAL CONTRIBUTIONS \$10,00					J OR MORE	-								
		- 1'	_	CONTRIBUTIONS		OR MORE									
_			_		,										
•	Names of Member LLCs Listed														
	NAME OF LLC LISTED IN PART 2 Lorenzo Exit, LLC			FULL NAMES OF MEMBERS											
				M&J Family Rev Trust											
-				Marissa Maas Perm Trust											
				Marissa Maas FBO Trust											

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.

SIGNATURE

Jul 23, 2024

CA Form 409 MCLP, LLC

Final Audit Report 2024-07-23

Created: 2024-07-23

By: Sarah Yonan (syonan@bmhlaw.com)

Status: Signed

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