

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>4 / 21 / 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: Maricopa Orchards LLC	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Farid Assemi	PRINCIPAL/RESPONSIBLE OFFICER PHONE #: (559) 440-8300	PRINCIPAL/RESPONSIBLE OFFICER EMAIL: fppc@bmhlaw.com
LLC STREET ADDRESS: 1306 West Herndon Avenue, Suite 101	CITY: Fresno	STATE: CA	ZIP CODE: 93711
LLC MAILING ADDRESS (IF DIFFERENT):		CITY:	STATE: ZIP CODE:
NAME OF COMMITTEE: Assemi Group, Inc. and affiliated entities		COMMITTEE ID: 1397645	COMMITTEE PHONE NUMBER: (559) 440-8300
COMMITTEE STREET ADDRESS: 1396 West Herndon Avenue, Suite 110		CITY: Fresno	STATE: ZIP CODE:
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
Darius Assemi	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			38 1/3
Farid Assemi	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			30 1/3
Farshid Assemi	<input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER <input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE			15 2/3
	<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 04/21/2022
DATE

By 
SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

Print
Clear