

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>1 / 16 / 24</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: MERCURY AVIATION COMPANIES, LLC | NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: JOSEPH A. CZYZYK | PRINCIPAL/RESPONSIBLE OFFICER PHONE #: (310) 827-5778 | PRINCIPAL/RESPONSIBLE OFFICER EMAIL: sosfilings@politicallaw.com |
| LLC STREET ADDRESS: 2780 SKYPARK DRIVE, SUITE 300 | CITY: TORRANCE | STATE: CA | ZIP CODE: 90505 |
| LLC MAILING ADDRESS (IF DIFFERENT): | | CITY: | STATE: ZIP CODE: |
| NAME OF COMMITTEE: JOSEPH A. CZYZYK & AFFILIATED ENTITY MERCURY AVIATION | | COMMITTEE ID: 1264025 | COMMITTEE PHONE NUMBER: (310) 827-5778 |
| COMMITTEE EMAIL ADDRESS: sosfilings@politicallaw.com | | | |
| COMMITTEE STREET ADDRESS: 2780 SKYPARK DRIVE, SUITE 300 | CITY: TORRANCE | STATE: CA | ZIP CODE: 90505 |
| 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 |
|---|--|--|---|-------------------------------|
| MERCURY AVIATION SERVICES HOLDING, INC. | <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 |
|------------------------------|-----------------------|
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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 07/19/2024 By _____
DATE SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

Print
Clear