

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>5 / 2 / 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: Valley Strong Ventures, LLC	NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER: Lindsay Reyes	PRINCIPAL/RESPONSIBLE OFFICER PHONE #: 661-833-7865	PRINCIPAL/RESPONSIBLE OFFICER EMAIL: Lindsay.Reyes@valleystrong.com
LLC STREET ADDRESS: 11500 Bolthouse Drive	CITY: Bakersfield	STATE: CA	ZIP CODE: 93311
LLC MAILING ADDRESS (IF DIFFERENT): P.O. Box 9506	CITY: Bakersfield	STATE: CA	ZIP CODE: 93389
NAME OF COMMITTEE: Valley Strong Credit Union and affiliates	COMMITTEE ID: 1439934	COMMITTEE PHONE NUMBER: 661-833-7024	COMMITTEE EMAIL ADDRESS: Lindsay.Reyes@valleystrong.com
COMMITTEE STREET ADDRESS: 11500 Bolthouse Drive	CITY: Bakersfield	STATE: CA	ZIP CODE: 93311
COMMITTEE MAILING ADDRESS (IF DIFFERENT): P.O. Box 9506	CITY: Bakersfield	STATE: CA	ZIP CODE: 93389

2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

FULL NAME	MEMBERSHIP TYPE	DATE(S) OF CAPITAL CONTRIBUTION (ONLY COMPLETE IF MEMBER HAS MET CAPITAL CONTRIBUTION THRESHOLD)	CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC	PERCENTAGE OWNERSHIP INTEREST
Valley Strong Credit Union	<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 May 3, 2024
DATE

By Lindsay Reyes
Lindsay Reyes (May 3, 2024 12:10 PDT) SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

Print

Clear

FPPC Form 409 (Nov/2021)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)







CA Form 409

Final Audit Report

2024-05-03

Created:	2024-05-03
By:	Sarah Yonan (syonan@bmhlaw.com)
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-  Document created by Sarah Yonan (syonan@bmhlaw.com)
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-  Signer lindsay.reyes@valleystrong.com entered name at signing as Lindsay Reyes
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