1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

OASIS VENTURE, LLC

2. 12-Digit Secretary of State File Number

201703410310

3. State, Foreign Country or Place of Organization (only if formed outside of California)

CALIFORNIA

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box

7700 College Town Drive Suite 250

City (no abbreviations)
Sacramento
State CA
Zip Code 95826

b. Mailing Address of LLC, if different than item 4a

7700 College Town Drive Suite 250

City (no abbreviations)
Sacramento
State CA
Zip Code 95826

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box

7700 College Town Drive Suite 250

City (no abbreviations)
Sacramento
State CA
Zip Code 95826

5. Manager(s) or Member(s)

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b

Andrey

b. Entity Name - Do not complete Item 5a

Sinadinos

c. Address

355 1st Street Apt S2401

City (no abbreviations)
San Francisco
State CA
Zip Code 94105

6. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent’s full name and California street address.

a. California Agent's First Name (if agent is not a corporation)

John

b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box

7700 College Town Drive, Suite 250

City (no abbreviations)
Sacramento
State CA
Zip Code 95826

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent’s Name (if agent is a corporation) – Do not complete Item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company

Agri. Tech. research and development

8. Chief Executive Officer, if elected or appointed

a. First Name

John

b. Address

355 1st Street Apt S2401

City (no abbreviations)
San Francisco
State CA
Zip Code 94105

9. The Information contained herein, including any attachments, is true and correct.

03/07/2019 John Sinadinos Corporate Counsel

Date Type or Print Name of Person Completing the Form Title Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

Name: [ ]
Company: [ ]
Address: [ ]
City/State/Zip: [ ]

Page 1 of 2
**A. Limited Liability Company Name**  
OASIS VENTURE, LLC

**B. 12-Digit Secretary of State File Number**  
201703410310

**C. State or Place of Organization** (only if formed outside of California)  
CALIFORNIA

**D. List of Additional Manager(s) or Member(s)**  
If the manager/member is an individual, enter the individual’s name and address. If the manager/member is an entity, enter the entity’s name and address. Note: The LLC cannot serve as its own manager or member.

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<th>Last Name</th>
<th>Suffix</th>
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