

18-312266

**FILED**

Secretary of State  
State of California

**MAY 25 2018**



Secretary of State  
Statement of Information  
(Limited Liability Company)

LLC-12

133

21.50/201pc  
**Corrected file # is:**

201812710533

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**IMPORTANT** — This form can be filed online at [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).

Read instructions before completing this form.

Filing Fee — \$20.00

Copy Fees — First page \$1.00; each attachment page \$0.50;  
Certification Fee — \$5.00 plus copy fees

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

Marcy Venture Partners GP, LLC

**2. 12-Digit Secretary of State Entity (File) Number**

20181270533

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

Delaware

**4. Business Addresses**

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

750 Battery St., Ste 700

City (no abbreviations)

San Francisco

State

CA

Zip Code

94111

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

City (no abbreviations)

State

Zip Code

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

City (no abbreviations)

State

CA

Zip Code

**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 address(es) on Form LLC-12A.

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

Lawrence

Middle Name

Last Name

Marcus

Suffix

b. Entity Name - Do not complete item 5a

c. Address

750 Battery St., Ste 700

City (no abbreviations)

San Francisco

State

CA

Zip Code

94111

**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)

Lawrence

Middle Name

Last Name

Marcus

Suffix

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

750 Battery St., Ste 700

City (no abbreviations)

San Francisco

State

CA

Zip Code

94111

**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**

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

General partner of venture capital fund

**8. Chief Executive Officer, if elected or appointed**

a. First Name

Middle Name

Last Name

Suffix

b. Address

City (no abbreviations)

State

Zip Code

**9. The information contained herein, including any attachments made part of this document, is true and correct.**

4-24-18

Date


Lawrence Marcus

Type or Print Name of Person Completing the Form

Managing Director

Title

Signature

 <p><b>Attachment to Statement of Information (Limited Liability Company)</b></p>	<p><b>LLC-12A Attachment</b></p>
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**A. Limited Liability Company Name** (Enter the exact name on file with the California Secretary of State.)  
**Marcy Venture Partners GP, LLC**

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<b>B. 12-Digit Secretary of State Entity (File) Number</b>  201812710533	<b>C. State, Foreign Country, or Place of Organization</b> (only if formed outside of California)  Delaware
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**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.

2a. First Name - Do not complete Item 2b <b>Shawn</b>	Middle Name	Last Name <b>Carter</b>	Suffix
2b. Entity Name - Do not complete Item 2a			
2c. Address <b>750 Battery St., Ste 700</b>	City (no abbreviations) <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94111</b>
3a. First Name - Do not complete Item 3b <b>Laurence</b>	Middle Name	Last Name <b>Brown</b>	Suffix <b>Jr.</b>
3b. Entity Name - Do not complete Item 3a			
3c. Address <b>750 Battery St., Ste 700</b>	City (no abbreviations) <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94111</b>
4a. First Name - Do not complete Item 4b	Middle Name	Last Name	Suffix
4b. Entity Name - Do not complete Item 4a			
4c. Address	City (no abbreviations)	State	Zip Code
5a. First Name - Do not complete Item 5b	Middle Name	Last Name	Suffix
5b. Entity Name - Do not complete Item 5a			
5c. Address	City (no abbreviations)	State	Zip Code
6a. First Name - Do not complete Item 6b	Middle Name	Last Name	Suffix
6b. Entity Name - Do not complete Item 6a			
6c. Address	City (no abbreviations)	State	Zip Code
7a. First Name - Do not complete Item 7b	Middle Name	Last Name	Suffix
7b. Entity Name - Do not complete Item 7a			
7c. Address	City (no abbreviations)	State	Zip Code
8a. First Name - Do not complete Item 8b	Middle Name	Last Name	Suffix
8b. Entity Name - Do not complete Item 8a			
8c. Address	City (no abbreviations)	State	Zip Code