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

2. 12-Digit Secretary of State File Number
201921310101

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

4. Business Addresses
   a. Street Address of Principal Office - Do not list a P.O. Box
      1013 Centre Road, Suite 403-B
      City (no abbreviations) Wilmington
      State DE Zip Code 19805
   b. Mailing Address of LLC, if different than item 4a
      7083 Hollywood Blvd
      City (no abbreviations) Los Angeles
      State CA Zip Code 90028
   c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box
      7083 Hollywood Blvd
      City (no abbreviations) Los Angeles
      State CA Zip Code 90028

5. Manager(s) or Member(s)
   a. First Name, if an individual - Do not complete Item 5b
      Anissa
      Middle Name
      Last Name Naouai
      Suffix
   b. Entity Name - Do not complete Item 5a
      Naouai
   c. Address
      7083 Hollywood Blvd
      City (no abbreviations) Los Angeles
      State CA Zip Code 90028

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)
      Anissa
      Middle Name
      Last Name Naouai
      Suffix
   b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box
      7083 Hollywood Blvd
      City (no abbreviations) Los Angeles
      State CA Zip Code 90028

   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
      Media production

8. Chief Executive Officer, if elected or appointed
   a. First Name
      Anissa
      Middle Name
      Last Name Naouai
      Suffix
   b. Address
      7083 Hollywood Blvd
      City (no abbreviations) Los Angeles
      State CA Zip Code 90028

9. The Information contained herein, including any attachments, is true and correct.
   12/04/2019 Amanda Jane Getty Maffick
   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:

LLC-12 (REV 01/2017)