

## State of California Secretary of State

STATEMENT OF INFORMATION (Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted )

NAHA LLC

FILED
In the office of the Secretary of State
of the State of California

SEP 2 7 2007

This Space For Filing Use O

FILE NUMBER AND STATE OR F	PLACE OF ORGANIZATION			
2 SECRETARY OF STATE FILE NUMBE	R	3. STATE OR PLACE OF ORGANIZA	TION	
200724810124		California		
COMPLETE ADDRESSES FOR T	HE FOLLOWING (Do not abbreviate	the name of the city. Items 4 and t	cannot be P.O. Box	(es )
4. STREET ADDRESS OF PRINCIPAL EX	RECUTIVE OFFICE	CITY AND STATE	•	ZIP CODE
4935 Avenida Oriente		Tarzana	CA	91356
5 CALIFORNIA OFFICE WHERE RECOF	RDS ARE MAINTAINED (DOMESTIC ONLY)	CITY	ŞTATE	ZIP CODE
4935 Avenida Oriente		Tarzana	· CA··	91356
NAME AND COMPLETE ADDRES	SS OF THE CHIEF EXECUTIVE OF	FICER, IF ANY		
6 NAME	ADDRESS	CITY AND STATE		ZIP CODE
	SS OF ANY MANAGER OR MAN		E BEEN APPOIN	TED OR ELEC
7. NAME	RESS OF EACH MEMBER (Attach a	dditional pages, if necessary.)  CITY AND STATE		ZIP CODE
	4935 Avenida Oriente	• • • • • • • • • • • • • • • • • • • •	CA	
Aleksandr Sargsyan			CA	
8 NAME	ADDRESS	CITY AND STATE		ZIP CODE
9 NAME	ADDRESS	CITY AND STATE		ZIP CODE
•				
address If the agent is a corporation, 1505 and Item 11 must be left blank.)  10 NAME OF AGENT FOR SERVICE OF I	ESS (If the agent is an individual, the a the agent must have on file with the Ca			
address If the agent is a corporation, 1505 and Item 11 must be left blank)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan	the agent must have on file with the Ca	ifornia Secretary of State a certific		
address If the agent is a corporation, 1505 and Item 11 must be left blank)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan	The agent must have on file with the Ca	ifornia Secretary of State a certific	ate pursuant to Cor	porations Code s
address If the agent is a corporation, 1505 and Item 11 must be left blank.)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan  11 ADDRESS OF AGENT FOR SERVICE	The agent must have on file with the Ca	DUAL CITY	STATE	zip code
address If the agent is a corporation, 1505 and Item 11 must be left blank.)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan  11 ADDRESS OF AGENT FOR SERVICE 4935 Avenida Oriente	The agent must have on file with the Ca PROCESS  OF PROCESS IN CALIFORNIA, IF AN INDIVI	DUAL CITY	STATE	zip code
address If the agent is a corporation, 1505 and Item 11 must be left blank.)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan  11 ADDRESS OF AGENT FOR SERVICE 4935 Avenida Oriente  TYPE OF BUSINESS	The agent must have on file with the Ca PROCESS  OF PROCESS IN CALIFORNIA, IF AN INDIVI  OF THE LIMITED LIABILITY COMPANY	DUAL CITY	STATE	zip code
address If the agent is a corporation, 1505 and Item 11 must be left blank)  10 NAME OF AGENT FOR SERVICE OF IT.  Aleksandr Sargsyan  11 ADDRESS OF AGENT FOR SERVICE  4935 Avenida Oriente  TYPE OF BUSINESS  12 DESCRIBE THE TYPE OF BUSINESS	The agent must have on file with the Caprocess  OF PROCESS IN CALIFORNIA, IF AN INDIVIOUS OF THE LIMITED LIABILITY COMPANY of and investments.	DUAL CITY	STATE	ziP CODE 91356
address If the agent is a corporation, 1505 and Item 11 must be left blank.)  10 NAME OF AGENT FOR SERVICE OF I Aleksandr Sargsyan  11 ADDRESS OF AGENT FOR SERVICE 4935 Avenida Oriente  TYPE OF BUSINESS  12 DESCRIBE THE TYPE OF BUSINESS Real estate development	The agent must have on file with the Caprocess  OF PROCESS IN CALIFORNIA, IF AN INDIVIOUS OF THE LIMITED LIABILITY COMPANY of and investments.	DUAL CITY Tarzana	STATE	ziP CODE 91356