

Limited Liability Company

L-LLC (10/2021)

This Limited Liability Company form should be completed for original applications or for changes of officers, managers, and members holding ownership in this business. For individuals outside the United States, not holding a social security number check the "Out of Country" box.

For more information contact your local TABC office or visit us at: www.tabc.texas.gov ENTITY INFORMATION 1. Federal Employer Identification Number (FEIN) 2. Business Entity Name Filing Number Member Managed or Manager Managed ☐ Member Managed ☐ Manager Managed 5. Date Filed (mm/dd/yyyy) State Class and Number of Memberships or Units Issued LIMITED LIABILITY COMPANY OWNERSHIP INFORMATION ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name МІ Title SSN Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name MI Title SSN ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held Officer ☐ Manager ☐ Member (Mark All That Apply) MI Title Last Name First Name ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held SSN ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name MI Title SSN ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name MI Title SSN ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name MI Title SSN ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held ☐ Officer ☐ Manager ☐ Member (Mark All That Apply) Last Name First Name MI Title SSN ☐ Out of Country Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held

CORPORATE OWNERSHIP INFORMATION CONTINUED			
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