



Secretary of State
Statement of Information
(Limited Liability Company)

LLC-12

22-A76024

FILED

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

FEB 02, 2022

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IMPORTANT — This form can be filed online at
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](#).)

ENEGIX L.L.C.

2. 12-Digit Secretary of State Entity Number

201906010400

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	City (no abbreviations)	State	Zip Code
1115 W SACRAMENTO AVENUE UNIT 111	CHICO	CA	95926
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1115 W SACRAMENTO AVENUE UNIT 111	CHICO	CA	95926
c. Street Address of California Office, if Item 4a is not in California Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
1115 W SACRAMENTO AVENUE UNIT 111	CHICO	CA	95926

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 additional managers/members, enter the names(s) and address(es) on [Form LLC-12A](#).

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
DANIEL		BLEY	
b. Entity Name - Do not complete Item 5a			
c. Address	City (no abbreviations)	State	Zip Code
1117 W SACRAMENTO AVE UNIT 223	CHICO	CA	95926

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) JONATHAN	Middle Name	Last Name FERRUCCI	Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 1117 W SACRAMENTO AVE UNIT 111	City (no abbreviations) CHICO	State CA	Zip Code 95926

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 TREE TRIMMING AND EQUIPMENT

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. Labor Judgment

Does a Manager or Member have an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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10. By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

02/02/2022

Date

JONATHAN FERRUCCI

Type or Print Name

MANAGER

Title

Signature



**Attachment to
Statement of Information
(Limited Liability Company)**

**LLC-12A
Attachment**

22-A76024

A. Limited Liability Company Name

ENEGIX L.L.C.

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B. 12-Digit Secretary of State File Number

201906010400

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.

First Name TATIANA	Middle Name	Last Name MEDINA	Suffix
Entity Name			
Address 1115 W SACRAMENTO AVENUE UNIT 111	City (no abbreviations) CHICO	State CA	Zip Code 95926
First Name	Middle Name	Last Name	Suffix
Entity Name JCS CAPITAL LLC			
Address 980 9TH STREET OFFICE 44	City (no abbreviations) SACRAMENTO	State CA	Zip Code 95814
First Name	Middle Name	Last Name	Suffix
Entity Name UPSTATE RESOURCE GROUP LLC			
Address 340 HAMMOCKS DRIVE	City (no abbreviations) ORCHARD PARK	State NY	Zip Code 14127
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address	City (no abbreviations)	State	Zip Code