



State of California Secretary of State

LL

STATEMENT OF INFORMATION (Limited Liability Company)

129

Filing Fee \$20.00. If this is an amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
Secretary of State
State of California

FEB 08 2016

This Space For Filing Use Only

1. LIMITED LIABILITY COMPANY NAME
Straight Edge Innovations, LLC

File Number and State or Place of Organization

2. SECRETARY OF STATE FILE NUMBER

201536510295

3. STATE OR PLACE OF ORGANIZATION (If formed outside of California)

No Change Statement

4. If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no Statement of Information has been previously filed, this form must be completed in its entirety.

If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 15.

Complete Addresses for the Following (Do not abbreviate the name of the city. Items 5 and 7 cannot be P.O. Boxes.)

5. STREET ADDRESS OF PRINCIPAL OFFICE

18 Field Point, Suite 711

CITY

Dove Canyon, CA

STATE

ZIP CODE

92679

6. MAILING ADDRESS OF LLC, IF DIFFERENT THAN ITEM 5

CITY

STATE

ZIP CODE

7. STREET ADDRESS OF CALIFORNIA OFFICE

18 Field Point, Suite 711

CITY

Dove Canyon

STATE

ZIP CODE

CA 92679

Name and Complete Address of the Chief Executive Officer, If Any

8. NAME

Tanner Fox

ADDRESS

18 Field Point

CITY

Dove Canyon, CA

STATE

ZIP CODE

92679

Name and Complete Address of Any Manager or Managers, or if None Have Been Appointed or Elected, Provide the Name and Address of Each Member (Attach additional pages, if necessary.)

9. NAME

Tanner Fox

ADDRESS

18 Field Point,

CITY

Dove Canyon, CA

STATE

ZIP CODE

92679

10. NAME

ADDRESS

CITY

STATE

ZIP CODE

11. NAME

ADDRESS

CITY

STATE

ZIP CODE

Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California address, a P.O. Box is not acceptable. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.

12. NAME OF AGENT FOR SERVICE OF PROCESS

Tanner Fox

13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

18 Field Point

CITY

Dove Canyon

STATE

CA

ZIP CODE

92679

Type of Business

14. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

E-Commerce

15. THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

12/18/15

DATE

Tanner Fox

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

Founder/CEO

TITLE

SIGNATURE