CALIFORNIA	FORM

Special	Election for	Business	Trusts and
Certain	Foreign Sin	gle Membe	er LLCs

Nama	of	ontity	

TAXABLE YEAR

3574

ZIP code

State

Name of entity	California S	ecretary of State (SOS) file number
DBA		FEIN
Address (suite, room, PO box, or PMB no.)		

City

If any of the entity's information has changed, complete the section below.

ame of entity		California Secretary of State (SOS) file number	
DBA		FEIN	
Address (suite, room, PO box, or PMB no.)			
City	State	ZIP code	
1 Type of election: (See instructions, General Information A, Purpose).			

a \square Existing eligible business trust electing to be classified as a partnership (the same as federal).

b Previously existing foreign single member limited liability company electing to be classified as a disregarded entity (the same as federal).

2 Effective date of election: month _____ day _____ year _____.

3 Person whom Franchise Tax Board may call for more information:

Name of contact person	Title	Telephone
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Consent Statement and Signature(s)

Under penalties of perjury, I (we) declare all of the following:

- I (We) consent to the election of the above-named entity to be classified as indicated above.
- I am (We are) aware of the filing requirements under Revenue and Taxation Code Sections 18633 and 18633.5 relating to the return filing
 requirements for a partnership or a disregarded entity.
- I am (We are) aware that this election is irrevocable.
- I (We) have examined the election and to the best of my (our) knowledge and belief, it is true, correct, and complete.
- If I am an officer, manager, or member signing for other members of the entity, I further declare that I am authorized to execute this consent on their behalf.

Member's name (print)	Signature	Title	Date