

OFFICE OF  
GENERAL COUNSEL

April 21, 2022

2022 APR 27 AM 7:14

Office of General Counsel  
Federal Election Commission  
1050 First St, NE  
Washington, DC 20463

MUR # 7986  
Amendment

To whom it may concern:

This complaint requests that the Federal Election Commission audit all instances in which a Limited Liability Company (LLC) contributed to Nathan Magsig, candidate for Congress to the California's 5th Congressional District as to whether those LLC entities file their IRS taxes as corporations or partnerships to determine whether he can accept those contributions to his federal campaign committee, Magsig for Congress, FEC ID C00797639.

11 CFR § 110.1(g) Contributions by limited liability companies ("LLC")—

1. *Definition.* A limited liability company is a business entity that is recognized as a limited liability company under the laws of the State in which it is established.
2. A contribution by an LLC that elects to be treated as a partnership by the Internal Revenue Service pursuant to 26 CFR 301.7701-3, or does not elect treatment as either a partnership or a corporation pursuant to that section, shall be considered a contribution from a partnership pursuant to 11 CFR 110.1(e).
3. An LLC that elects to be treated as a corporation by the Internal Revenue Service, pursuant to 26 CFR 301.7701-3, or an LLC with publicly-traded shares, shall be considered a corporation pursuant to 11 CFR Part 114.
4. A contribution by an LLC with a single natural person member that does not elect to be treated as a corporation by the Internal Revenue Service pursuant to 26 CFR 301.7701-3 shall be attributed only to that single member.
5. An LLC that makes a contribution pursuant to paragraph (g)(2) or (g)(4) of this section shall, at the time it makes the contribution, provide information to the recipient committee as to how the contribution is to be attributed, and affirm to the recipient committee that it is eligible to make the contribution.

Based on business filings with the California Secretary State the following 6 registered LLCs gave contributions to the Magsig for Congress committee:

1. Beal Developments LLC – 200727810047 -  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/030240006173164219190074194024060184009165129212>

2. Palm Place Investments, LLC – 201017510004 –  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/247134249218081163119235231078095071049229221176>
3. River Ranch Citrus, LLC – 201324210192 –  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/071065040142187081105054216081014230209179009089>
4. Westech Systems, LLC – 202013610338 –  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/172004241235039131031165253227253045247074250212>
5. Copper River Ranch Villages, LLC – 200430110069 –  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/116061049097175039055166001109109120157139017005>
6. TriValley Development Group, LLC – 201504210070 -  
<https://bizfileonline.sos.ca.gov/api/report/GetImageByNum/238029181216134210220245175231134171204192127215>

The burden is on the committee to verify that it is permissible that those LLCs can contribute to a federal candidate campaign committee. In a prior complaint to the FEC, I have demonstrated that the committee has knowingly accepted prohibited contributions from corporate entities, which raises serious questions about the committee's ability to fully vet every contribution to ensure they are legally permissible.

I request that the FEC fully investigate and audit the Magsig for Congress committee's contributions to ensure they are fully complying with the federal campaign finance laws and regulations. I am affirming that to the best of my knowledge under penalty of perjury that this information I have stated is accurate.

Sincerely,



Charles Dudek

Oakhurst, CA 93644

Attachments:

6 LLC business filings with California Secretary of State

**CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202**

- See Attached Document (Notary to cross out lines 1–6 below)
- See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

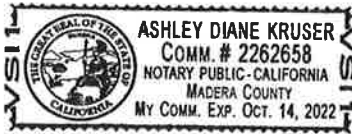
1 \_\_\_\_\_  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_  
 4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

\_\_\_\_\_  
*Signature of Document Signer No. 1*                      *Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
 County of Madera

Subscribed and sworn to (or affirmed) before me  
 on this 21 day of April, 2022,  
 by                      Date                      Month                      Year  
 (1) Charles Franklin Dudek  
 (and (2) \_\_\_\_\_ ),  
*Name(s) of Signer(s)*



proved to me on the basis of satisfactory evidence  
 to be the person(s) who appeared before me.

Signature *Ashley Kruser*  
*Signature of Notary Public*

*Seal*  
 Place Notary Seal Above

**OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_  
 Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_



**Secretary of State**  
**Statement of Information**  
 (Limited Liability Company)

**LLC-12**

18-B90738

**FILED**

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

MAY 30, 2018

**This Space For Office Use Only**

**IMPORTANT** — 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.)

BEAL DEVELOPMENTS LLC

**2. 12-Digit Secretary of State File Number**

200727810047

**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
1175 SHAW AVENUE #104 PMB 372	CLOVIS	CA	93612
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1175 SHAW AVENUE #104 PMB 372	CLOVIS	CA	93612
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
1175 SHAW AVENUE #104 PMB 372	CLOVIS	CA	93612

**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 entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
GEORGE	J.	BEAL	
b. Entity Name - Do not complete Item 5a			
c. Address	City (no abbreviations)	State	Zip Code
1175 SHAW AVENUE #104 PMB 372	CLOVIS	CA	93612

**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 <b>not</b> a corporation)	Middle Name	Last Name	Suffix
GEORGE	J.	BEAL	
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b>	City (no abbreviations)	State	Zip Code
1175 SHAW AVENUE #104 PMB 372	CLOVIS	CA	93612

**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**

a. Describe the type of business or services of the Limited Liability Company  
 REAL ESTATE DEVELOPMENT

**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. The Information contained herein, including any attachments, is true and correct.**

05/30/2018

GEORGE J. BEAL

MEMBER

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)


Name: [ ]

Company:

Address:

City/State/Zip: [ ]

18-B90738

	<b>Attachment to Statement of Information (Limited Liability Company)</b>	<b>LLC-12A Attachment</b>
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<b>A. Limited Liability Company Name</b> BEAL DEVELOPMENTS LLC
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This Space For Office Use Only

<b>B. 12-Digit Secretary of State File Number</b> 200727810047	<b>C. State or Place of Organization</b> (only if formed outside of California) CALIFORNIA
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**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 STERLENE	Middle Name J.	Last Name BEAL	Suffix
Entity Name			
Address 1175 SHAW AVENUE #104 PMB 372		City (no abbreviations) CLOVIS	State CA
		Zip Code 93612	
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	
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	

20-409524



Secretary of State  
Statement of Information -  
No Change  
(Limited Liability Company)

LLC-12NC

GT

65

**FILED**  
Secretary of State  
State of California

JUN 08 2020

**IMPORTANT** — This form can be filed online at [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).  
Read instructions before completing this form. This form may be used only if a complete Statement of Information has been filed previously and there has been no change.

**Filing Fee** - \$20.00

**Copy Fee** - \$1.00 per copy;  
Certification Fee - \$5.00 plus copy fee

26/20/CC  
Above Space For Office Use Only

**1. Limited Liability Company Name** (Enter the exact name on file with the California Secretary of State. Note: If you registered in California using an alternate name, see Instructions.)

Palm Place Investments, LLC

**2. 12-Digit Secretary of State Entity (File) Number**

2 0 1 0 1 7 5 1 0 0 0 4

**3. State, Foreign Country or Place of Organization**  
(only if formed outside of California)

CA

**4. No Change Statement** (Do not alter the No Change Statement. If there has been any change, file the Statement of Information online at [bizfile.sos.ca.gov](http://bizfile.sos.ca.gov).)

*There has been no change in any of the information contained in the previous complete Statement of Information filed with the California Secretary of State.*

**5. 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.**

3/26/2020  
Date

Palm Place Investments, LLC  
By: Central Valley Development, LLC, Its Manager  
By: Timothy Jones, Manager

\_\_\_\_\_  
Type or Print Name of Person Completing the Form

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature



**Secretary of State**  
**Statement of No Change**  
 (Limited Liability Company)

**LLC-12NC**

21-E44483

**FILED**

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

AUG 27, 2021

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**IMPORTANT — Read instructions before completing this form. This form may be used only if a complete Statement of Information has been filed previously and there has been no change.**

**Filing Fee – \$20.00**

**Copy Fee – \$1.00;**  
 Certification Fee - \$5.00 plus copy fee

**1. Limited Liability Company Name** (Enter the **exact** name of the LLC as it is recorded with the California Secretary of State. Note: If you registered in California using an alternate name, see instructions.)

RIVER RANCH CITRUS, LLC, A CALIFORNIA LIMITED LIABILITY COMPANY

**2. 12-Digit Secretary of State File Number**

201324210192

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

CALIFORNIA

**4. No Change Statement** (Do not alter the No Change Statement. If there has been any change, please complete a Statement of Information (Form LLC-12).)

*There has been no change in any of the information contained in the previous complete Statement of Information filed with the California Secretary of State.*

**5.** The information contained herein is true and correct.

08/27/2021

Enrique Morales

Senior Accountant

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document, enter the name of a person or company and the mailing address. This information will become public when filed. (SEE INSTRUCTIONS BEFORE COMPLETING.)

Name:

Company:

Address:

City/State/Zip:

21-405162



**Secretary of State**  
**Statement of Information**  
 (Limited Liability Company)

LLC-12

103

**FILED**  
 Secretary of State  
 State of California

APR 12 2021

N/F  
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**IMPORTANT** — This form can be filed online at [bizfile.sos.ca.gov](http://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.)

**WESTECH SYSTEMS, LLC**

2. 12-Digit Secretary of State Entity (File) Number

2 0 2 0 1 3 6 1 0 3 3 8

3. State, Foreign Country or Place of Organization (only if formed outside of California)

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box <b>827 Jefferson Avenue</b>	City (no abbreviations) <b>Clovis</b>	State <b>CA</b>	Zip Code <b>93612</b>
b. Mailing Address of LLC, if different than Item 4a	City (no abbreviations)	State	Zip Code
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box	City (no abbreviations)	State <b>CA</b>	Zip Code

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 entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and address(es) on Form LLC-12A.

a. First Name, if an individual - Do not complete Item 5b <b>Helder</b>	Middle Name	Last Name <b>Domingos</b>	Suffix
b. Entity Name - Do not complete Item 5a			
c. Address <b>827 Jefferson Avenue</b>	City (no abbreviations) <b>Clovis</b>	State <b>CA</b>	Zip Code <b>93612</b>

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) <b>Randolf</b>	Middle Name	Last Name <b>Krbechek</b>	Suffix <b>Esq.</b>
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box <b>9477 N. Fort Washington Road, Suite 104</b>	City (no abbreviations) <b>Fresno</b>	State <b>CA</b>	Zip Code <b>93730</b>

**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
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7. Type of Business

Describe the type of business or services of the Limited Liability Company

**Electrical Contracting**

8. Chief Executive Officer, if elected or appointed

a. First Name <b>Helder</b>	Middle Name	Last Name <b>Domingos</b>	Suffix
b. Address <b>827 Jefferson Avenue</b>	City (no abbreviations) <b>Clovis</b>	State <b>CA</b>	Zip Code <b>93612</b>

9. 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.

March 23, 2021

**Randolf Krbechek**

**Attorney**

Date

Type or Print Name of Person Completing the Form

Title

Signature





**Secretary of State**  
Statement of No Change  
(Limited Liability Company)

**LLC-12NC**

20-E13102

**FILED**

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

OCT 13, 2020

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**Filing Fee — \$20.00**

**Copy Fee — \$1.00;**  
Certification Fee - \$5.00 plus copy fee

**1. Limited Liability Company Name** (Enter the **exact** name of the LLC as it is recorded with the California Secretary of State. Note: If you registered in California using an alternate name, see instructions.)

COPPER RIVER RANCH VILLAGES, LLC

**2. 12-Digit Secretary of State File Number**

200430110069

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

CALIFORNIA

**4. No Change Statement** (Do not alter the No Change Statement. If there has been any change, please complete a Statement of Information (Form LLC-12).)

*There has been no change in any of the information contained in the previous complete Statement of Information filed with the California Secretary of State.*

**5.** The information contained herein is true and correct.

10/13/2020

Date

Gary L. McDonald

Type or Print Name of Person Completing the Form

President

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document, enter the name of a person or company and the mailing address. This information will become public when filed. (SEE INSTRUCTIONS BEFORE COMPLETING.)

Name: [ ]

Company:

Address:

City/State/Zip: [ ]



**Secretary of State**  
**Statement of Information**  
 (Limited Liability Company)

**LLC-12**

21-F64772

**FILED**

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

OCT 28, 2021

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**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.)

TRIVALLEY DEVELOPMENT GROUP, LLC

**2. 12-Digit Secretary of State File Number**

201504210070

**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
3541 Rocco Ct	Plesanton	CA	94588
b. Mailing Address of LLC, if different than item 4a	City (no abbreviations)	State	Zip Code
1865 Herndon Ave K518	Clovis	CA	93611
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
3541 Rocco Ct	Plesanton	CA	94588

**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 entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b	Middle Name	Last Name	Suffix
Manny		Penn	
b. Entity Name - Do not complete Item 5a			
c. Address	City (no abbreviations)	State	Zip Code
100 Holly Springs	Irvine	CA	92618

**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 <b>not</b> a corporation)	Middle Name	Last Name	Suffix
Mohanraj		Ramasamy	
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b>	City (no abbreviations)	State	Zip Code
3541 Rocco Court	Plesanton	CA	94588

**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**

a. Describe the type of business or services of the Limited Liability Company  
 Real Estate Investments

**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. The Information contained herein, including any attachments, is true and correct.**

10/28/2021

Manny Penn

Manager

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

Name: [ ]

Company:

Address:

City/State/Zip: [ ]