

**Proof of Address**  
**Parents Undertaking**

We, VARUNKUMAR REDDY KAITHI (FATHER) AND  
TEJASREE KALLALA (MOTHER), the parents of

ARYAN REDDY KAITHI have the full and complete  
custody of: ARYAN REDDY KAITHI

Name of the Minor Child: ARYAN REDDY KAITHI

Date of Birth: NOV - 24 - 2024

Residing at: 10926 POBLADO RD APT 2512  
SAN DIEGO, CA, 92127

Residing since: APRIL-19-2024 to: PRESENT

We further certify that the above information is true and accurate.

Sincerely,

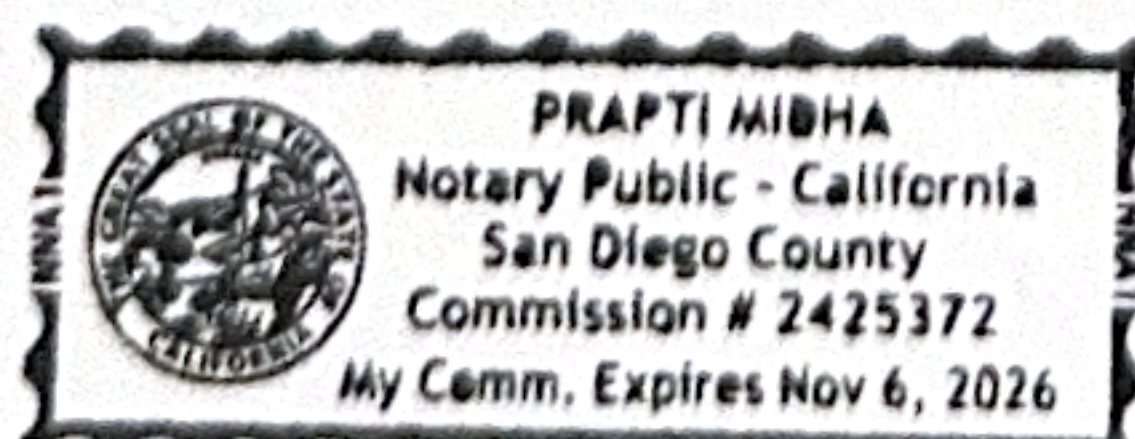
Mother's

Name: TEJASREE KALLALA Signature: K. Tejasree

Father's

Name: VARUNKUMAR REDDY KAITHI Signature: K. VARUN Reddy

*Prapti Mishra*  
*Feb 21, 2025*



*See Attached*  
*CA Notary*  
*certificate*



**CALIFORNIA ACKNOWLEDGMENT**

CIVIL CODE § 1189

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 SAN DIEGO

On Feb 21, 2025  
Date

before me, PRAPTI MIDHA, NOTARY PUBLIC  
Here Insert Name and Title of the Officer

personally appeared TE JASREE KALLALA & VARUN KUMAR REDDY  
Name(s) of Signer(s)

KAITHI

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal and/or Stamp Above

Signature

Prapti Midha  
Signature of Notary Public

**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: Proof of Address Parents Undertaking

Document Date: Feb 21, 25 Number of Pages: 1

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

☐ Corporate Officer – Title(s): \_\_\_\_\_

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

☐ Corporate Officer – Title(s): \_\_\_\_\_

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_