



KIMBERLY L. GRADY
AMADOR COUNTY CLERK/RECORDER
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(209) 223-6468

This space for Clerk's use only

Previous #: _____

Expires: _____

ID Checked

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Original

New Filing (Change in Facts)

Refile (No Change in Facts)

FILING FEE: \$33.00 - \$5.00 per each additional Business Name or Registrant Owner

FILE NUMBER:

FICTITIOUS BUSINESS NAME STATEMENT

* The following person(s) is (are) doing business as:

** Street Address (No PO Box, Postal Facility or PMB)

City State Zip Code County Business Phone Number

***** 1. REGISTRANT NAME & BUSINESS MAILING ADDRESS**

Name (Individual, Corp, LLC, General Partner, Trustee):

Business Mailing Address (if different than above)

City, State & Zip Code

***** 2. REGISTRANT NAME & BUSINESS MAILING ADDRESS**

Name (Individual, Corp, LLC, General Partner, Trustee):

Business Mailing Address (if different than above)

City, State & Zip Code

***** 3. REGISTRANT NAME & BUSINESS MAILING ADDRESS**

Name (Individual, Corp, LLC, General Partner, Trustee):

Business Mailing Address (if different than above)

City, State & Zip Code

***** 4. REGISTRANT NAME & BUSINESS MAILING ADDRESS**

Name (Individual, Corp, LLC, General Partner, Trustee):

Business Mailing Address (if different than above)

City, State & Zip Code

Note: If more than Four Registrants, attach additional Sheet

**** This business is conducted by: (Check One)

- Individual
- Married Couple
- Copartners
- Joint Venture
- General Partnership
- Limited Partnership
- Trust
- Limited Liability Partnership

- Limited Liability Company, State of Organization: _____
- Corporation, State of Incorporation: _____
- State or Local Registered Domestic Partners
- An Unincorporated Association other than a partnership

*****The registrant commenced to transact business under the fictitious business name or names listed above on:

Enter N/A if you have not yet commenced to transact business.

Note: Cannot be a future date.

(Month/Day/Year or N/A)

Business & Professions Code 17930 Any person who executes, files or publishes any statement under this chapter, knowing it to be false, in whole or in part, is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1000).

This statement was filed with the Amador County Clerk on the date indicated by the FILED stamp in the upper right corner.
 Signer acknowledges receipt of the information & instructions on the reverse of this form.

I declare that all information in this statement is true and correct

Signature of Registrant:

NOTE: If Corporation, also print title of Officer.
 If LLC, also print title of Officer/Manager

Print Name of Signer:

NOTICE—IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

CERTIFICATION

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

KIMBERLY L. GRADY, COUNTY CLERK/RECORDER

BY: _____ DEPUTY CLERK

*Business and Professions Code Section 17915*The fictitious business name statement shall be filed with the clerk of the county in which the registrant has his or her principal place of business in this state or, if the registrant has no place of business in this state with the Clerk of Sacramento County. Nothing in this chapter shall preclude a person from filing a fictitious business name statement in a county other than where the principal place of business is located, as long as the requirements of this subdivision are also met.

Business and Professions code Section 17900(b)(1) In the case of an individual, a name that does not include the surname of the individual or name that suggests the existence of additional owners, as described in subdivision (c).

*** Where one asterisk appears in the form:**

- (a) Insert the fictitious business name or names
- (b) Only those businesses operated at the same address and under the same ownership may be listed on one statement

**** Where two asterisks appear in the form:**

- (a) If the registrant has a place of business in this state, insert the street address and county of the registrant's principal place of business in this state
- (b) If the registrant has no place of business in this state, insert the street address and county of the registrant's principal place of business outside this state and file with the Clerk of Sacramento County (*Business & Professions Code Section 17915*)

*****Where three asterisks appear in the form:**

- (a) If the registrant is an **individual**, insert the registrant's full name and business mailing address if it differs from the business address
- (b) If the registrants are a **married couple**, insert the full name and business mailing address of both parties to the marriage if it differs from the business address
- (c) If the registrant is a **general partnership, co-partnership, joint venture, limited liability partnership, unincorporated association other than a partnership** or a **limited partnership** insert the full name and business mailing address of **each general partner**, if it differs from the business address
- (d) If the registrant is a **limited liability company**, insert the name and business mailing address of the limited liability company, as set out in the articles of organization on file with the CA Secretary of State, and the state of organization
- (e) If the registrant is a **trust**, insert the full names and business mailing address of each trustee
- (f) If the registrant is a **corporation**, insert the name and address of the corporation, as set out in the articles of incorporation on file with the CA Secretary of State, and the state of incorporation
- (g) If the registrants are **state registered domestic partners**, insert the full name and business mailing address of each domestic partner if it differs from the business address

******Where four asterisks appear in the form:**

- (a) Check whichever of the terms listed on the front of the form best describes the nature of the business

*******Where five asterisks appear in the form:** *Business and Professions Code Section 17913*

- (a) Insert the date on which the registrant first commenced to transact business under the fictitious business name or names listed, if already transacting business under that name or names
- (b) Insert **N/A** if you have not yet commenced to transact business under the fictitious business names or names listed

SIGNATURE OF REGISTRANT *Business and Professions Code Section 17914*

The statement shall be signed as follows:

- (a) If the registrant is an **individual**, by the individual
- (b) If the registrants are a **married couple**, by either party to the marriage
- (c) If the registrant is a **general partnership, limited partnership, limited liability partnership, co-partnership, joint venture, or unincorporated association other than a partnership**, by a general partner
- (d) If the registrant is a **limited liability company**, by a manager or officer –indicate his/her title, an agent is not acceptable
- (e) If the registrant is a **trust**, by a trustee
- (f) If the registrant is a **corporation**, by an officer –indicate the title of the officer
- (g) If the registrant is a **state registered domestic partnership**, by one of the domestic partners

PUBLICATION for Original, New Filings (renewal with change in facts from previous filing) *Business and Professions Code Section 17917*

- (a) Within 45 days after a fictitious business name statement has filed, the registrant shall cause it to be published in a newspaper of general circulation in the county where the fictitious business name statement was filed. If the registrant does not have a place of business in this state, the notice shall be published in a newspaper of general circulation in Sacramento County. The publication must be once a week for 4 successive weeks and an affidavit of publication must filed with the county clerk where the fictitious business name statements were filed within 45 days after the completion of the publication.
- (b) If a re-filing is required because the prior statement has expired, the re-filing need not be published, unless there has been a change in the information required in the expired statement, provided the re-filing is filed within 40 days of the date the statement expired.

ABANDONMENT OF FICTITIOUS BUSINESS NAME *Business and Professions Code Section 17922*

Upon ceasing to transact business in this state under a fictitious business name that was filed in the previous five years, a registrant who has filed a fictitious business name statement shall file a statement of abandonment of use of fictitious business name. The statement shall be executed and published in the same manner as a fictitious business name statement and shall be filed with the county clerk of the county in which the registrant has filed the fictitious business name statement.