

File # _____

Type of Filing: (Check One)

- Original
 - New Filing
[Change(s) in facts from previous filing]
 - Refile
[No change(s) in facts from previous filing]
- Previous file # _____

Kings County Clerk/Recorder

1400 W Lacey Blvd.
Hanford, CA 93230

This space reserved for County Clerk/Recorder

FICTITIOUS BUSINESS NAME STATEMENT

THE FOLLOWING PERSON (PERSONS) IS (ARE) DOING BUSINESS AS: (Please Print or Type)

* Fictitious Business Name (please number if more than one business name)			
** Street address of principal place of business			
City	State	Zip	County

***REGISTERED OWNER(S): (If more than four owners, attach additional sheet showing owner information)

<p>1.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Full Name</td></tr> <tr><td>Business Mailing Address</td></tr> <tr><td>City State Zip</td></tr> <tr><td>If Corporation or LLC – Print State of Incorporation/Organization</td></tr> </table>	Full Name	Business Mailing Address	City State Zip	If Corporation or LLC – Print State of Incorporation/Organization	<p>2.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Full Name</td></tr> <tr><td>Business Mailing Address</td></tr> <tr><td>City State Zip</td></tr> <tr><td>If Corporation or LLC – Print State of Incorporation/Organization</td></tr> </table>	Full Name	Business Mailing Address	City State Zip	If Corporation or LLC – Print State of Incorporation/Organization
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***THIS BUSINESS IS CONDUCTED BY: (Check one) [¹ requires registration with the CA Secretary of State]

- An Individual
- A General Partnership
- A Limited Partnership ¹
- A Limited Liability Company ¹
- An Unincorporated Association other than a Partnership
- A Corporation ¹
- A Trust
- Copartners
- Married Couple
- Joint Venture
- State or Local Registered Domestic Partners
- Limited Liability Partnership

*****The registrant commenced to transact business under the fictitious business name or names listed above on _____
(Insert N/A if you haven't started to transact business)

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

A registrant who declares as true any material matter pursuant to this section that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).

Signature of Registrant _____ Phone Number _____

Printed Name and Title _____
(Printed Name and Title of Person Signing - See instructions for authorized signatories/titles)

This statement was filed with the County Clerk/Recorder of Kings County on the date indicated by the filing stamp in the upper right hand corner. _____

NOTICE: IN ACCORDANCE WITH SUBDIVISION (A) OF SECTION 17920, A FICTITIOUS BUSINESS 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/RECORDER, EXCEPT, AS PROVIDED IN SUBDIVISION (B) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGES 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 THE 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).

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

KRISTINE LEE, Kings County Clerk/Recorder

By: _____, Deputy

INSTRUCTIONS FOR COMPLETION OF STATEMENT

BUSINESS AND PROFESSIONS CODE SECTION 17913:

* 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 his or her 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 his or her principal place of business outside this state and file with the Clerk of Sacramento County (B&P 17915)
- (c) Mail Box and Post Office Box Numbers are not acceptable as a business address when used alone without a street address

*** Where three asterisks appear in the form:

- (a) If the registrant is an **individual**, insert his or her full name and residence address
- (b) If the registrants are a **married couple**, insert the full name and residence address of both parties to the marriage
- (c) If the registrant is a **general partnership, copartnership, joint venture, limited liability partnership, or unincorporated association** other than a partnership, insert the full name and residence address of each general partner
- (d) If the registrant is a **limited partnership**, insert the full name and residence address of each general partner
- (e) If the registrant is a **limited liability company**, insert the name and address of the limited liability company, as set out in its articles of organization on file with the CA Secretary of State, and the state of organization
- (f) If the registrant is a **trust**, insert the full name and residence address of each trustee
- (g) If the registrant is a **corporation**, insert the name and address of the corporation, as set out in its articles of incorporation on file with the CA Secretary of State, and the state of incorporation
- (h) If the registrants are **state or local registered domestic partners**, insert the full name and residence address of each domestic partner

**** 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:

- (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 name or names listed

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, copartnership, 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
- (e) If the registrant is a trust, by a trustee
- (f) If the registrant is a corporation, by an officer
- (g) If the registrant is a state or local registered domestic partnership, by one of the domestic partners

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 that where the principal place of business is located, as long as the requirements of this subdivision are also met.

BUSINESS AND PROFESSIONS CODE SECTION 17917

Publication for Original, New Filings (renewal with change in facts from previous filing), or Refile

- (a) Within 30 days after a fictitious business name statement has been 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 or, if there is no such newspaper in that county, in a newspaper of general circulation in an adjoining county. 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 four successive weeks and an affidavit of publication must be filed with the county clerk where the fictitious business name statement was filed within 30 days after the completion of the publication.
- (b) If a refiling is required because the prior statement has expired, the refiling need not be published, unless there has been a change in the information required in the expired statement, provided the refiling is filed within 40 days of the date the statement expired.

BUSINESS AND PROFESSIONS CODE SECTION 17922

Abandonment of Fictitious Business Name

- (a) Upon ceasing to transact business in this state under a fictitious business name that was filed in the previous five years, a person 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 person has filed his or her fictitious business name statement.

BUSINESS AND PROFESSIONS CODE SECTION 17930

Any person who executes, files, or publishes any statement under this chapter, knowing that such statement is false, in whole or in part, shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not to exceed one thousand dollars (\$1,000).



KINGS COUNTY GOVERNMENT CENTER
1400 WEST LACEY BLVD
HANFORD, CALIFORNIA 93230-5905

KRISTINE LEE
COUNTY OF KINGS
ASSESSOR/CLERK/RECORDER

PHONE (559) 852-2470
FAX – ASSESSOR (559) 582-2794
FAX – CLERK/RECORDER (559) 582-6639

AFFIDAVIT OF IDENTITY – FICTITIOUS BUSINESS NAME STATEMENT

In accordance with California State Law, the following identifying information is required to file a Fictitious Business Name Statement.

This certificate must be signed in the presence of a Notary.

Registered Owner _____
First and Last Name or Company Name

Fictitious Business Name _____

Business Mailing Address _____
Street Address

City

State

Zip Code

I, _____, declare under penalty of perjury under the laws of the State of California, that I
(Print Name)
am the registrant and intend to file this Fictitious Business Name

Subscribed to the _____ day of _____ 20____, at _____,
(Day) (Month) (City) (State)

(Signature)

CERTIFICATE OF ACKNOWLEDGEMENT

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)
) ss
County of)

On _____, before me _____, Notary Public personally
(Insert name)

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

NOTARY SIGNATURE