

PLEASE RETURN FILED COPIES TO:

NAME

MAILING ADDRESS

CITY STATE ZIP

PHONE NUMBER

STATEMENT OF ABANDONMENT OF USE OF FICTITIOUS BUSINESS NAME

THE FICTITIOUS BUSINESS NAME WAS FILED IN SAN LUIS OBISPO COUNTY ON:

ORIGINAL FILE NUMBER:

FICTITIOUS BUSINESS NAME(S) TO BE ABANDONED:

STREET ADDRESS, CITY, STATE AND ZIP OF PRINCIPAL PLACE OF BUSINESS:

COUNTY OF PRINCIPAL PLACE OF BUSINESS:

THE FOLLOWING PERSON(S) HAVE ABANDONED THE USE OF THE FICTITIOUS BUSINESS NAME:

1. FULL NAME AS LISTED ON FICTITIOUS BUSINESS STATEMENT:

2. FULL NAME AS LISTED ON FICTITIOUS BUSINESS STATEMENT:

RESIDENCE ADDRESS:

RESIDENCE ADDRESS:

CITY, STATE, ZIP:

CITY, STATE, ZIP:

3. FULL NAME AS LISTED ON FICTITIOUS BUSINESS STATEMENT:

4. FULL NAME AS LISTED ON FICTITIOUS BUSINESS STATEMENT:

RESIDENCE ADDRESS:

RESIDENCE ADDRESS:

CITY, STATE, ZIP:

CITY, STATE, ZIP:

THIS BUSINESS WAS CONDUCTED BY:

- AN INDIVIDUAL A TRUST A GENERAL PARTNERSHIP A LIMITED LIABILITY PARTNERSHIP
- A MARRIED COUPLE JOINT VENTURE A LIMITED PARTNERSHIP STATE OR LOCAL REGISTERED DOMESTIC PARTNERSHIP
- COPARTNERSHIP A CORPORATION A LIMITED LIABILITY COMPANY AN UNINCORPORATED ASSOCIATION OTHER THAN A PARTNERSHIP

"I DECLARE THAT ALL INFORMATION IN THIS STATEMENT IS TRUE AND CORRECT."

(A REGISTRANT WHO DECLARES AS TRUE ANY MATERIAL MATTER PURSUANT SECTION 17913 OF THE BUSINESS & PROFESSIONS CODE 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

PRINTED NAME OF REGISTRANT.

IF CORPORATION, ALSO PRINT TITLE OF OFFICER.

IF LLC, ALSO PRINT TITLE OF OFFICER OR MANAGER.

THIS STATEMENT WAS FILED WITH THE COUNTY CLERK OF SAN LUIS OBISPO COUNTY ON THE DATE INDICATED IN THE UPPER RIGHT CORNER

CERTIFICATION

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

TOMMY GONG
COUNTY CLERK RECORDER

BY: _____
DEPUTY CLERK

DISTRIBUTION OF COPIES:

- 1ST COPY - COUNTY CLERK
- 2ND COPY- ATTORNEY OR BANK
- 3RD COPY- PUBLICATION
- 4TH COPY- REGISTRANT

THE INSTRUCTIONS BELOW ARE NOT TO BE PUBLISHED (SEC. 17924, B&P)

INSTRUCTIONS FOR COMPLETION OF STATEMENT:

SECTION 17922 BUSINESS & PROFESSIONS CODE

UPON CEASING TO TRANSACT BUSINESS IN THIS STATE UNDER A FICTITIOUS BUSINESS NAME THAT WAS FILED IN THE PREVIOUS FIVE YEARS, A PERSON(S) 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 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(S) FILED THEIR FICTITIOUS BUSINESS NAME STATEMENT. THE STATEMENT SHALL BE PUBLISHED IN THE SAME MANNER AS THE FICTITIOUS BUSINESS NAME STATEMENT AND AN AFFIDAVIT SHOWING ITS PUBLICATION SHALL BE FILED WITH THE COUNTY CLERK AFTER COMPLETION OF PUBLICATION.

THE STATEMENT SHALL INCLUDE:

- (1) THE NAME BEING ABANDONED AND THE STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS.
- (2) THE DATE ON WHICH THE FICTITIOUS BUSINESS NAME STATEMENT RELATING TO THE FICTITIOUS BUSINESS NAME BEING ABANDONED WAS FILED, THE FILE NUMBER AND THE COUNTY WHERE FILED.
- (3) IF THE REGISTRANT IS AN INDIVIDUAL, INSERT HIS OR HER FULL NAME AND RESIDENCE ADDRESS.
- (4) IF THE REGISTRANTS ARE A MARRIED COUPLE, INSERT THE FULL NAME AND RESIDENCE ADDRESS OF BOTH PARTIES TO THE MARRIAGE.
- (5) IF THE REGISTRANT IS A GENERAL PARTNERSHIP, LIMITED PARTNERSHIP, COPARTNERS, A LIMITED LIABILITY PARTNERSHIP, A JOINT VENTURE, OR AN UNINCORPORATED ASSOCIATION OTHER THAN A PARTNERSHIP, INSERT FULL NAME AND RESIDENCE ADDRESS OF EACH GENERAL PARTNER.
- (6) 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.
- (7) IF THE REGISTRANT IS A TRUST, INSERT THE NAME AND FULL RESIDENCE ADDRESS OF EACH TRUSTEE.
- (8) 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.
- (9) IF THE REGISTRANTS ARE STATE OR LOCAL REGISTERED DOMESTIC PARTNERS, INSERT THE FULL NAME AND RESIDENCE ADDRESS OF EACH DOMESTIC PARTNER.

NOTICE TO REGISTRANT– SECTION 17924/19722 BUSINESS & PROFESSIONS CODE

THE STATEMENT OF ABANDONMENT OF FICTITIOUS BUSINESS NAME MUST BE PUBLISHED IN A NEWSPAPER ONCE A WEEK FOR FOUR SUCCESSIVE WEEKS AND AN AFFIDAVIT OF PUBLICATION FILED WITH THE COUNTY CLERK WITHIN 30 DAYS AFTER PUBLICATION HAS BEEN ACCOMPLISHED. THE STATEMENT SHOULD BE PUBLISHED IN A NEWSPAPER OF GENERAL CIRCULATION IN THE COUNTY WHERE THE PRINCIPAL PLACE OF BUSINESS IS LOCATED. THE STATEMENT SHOULD BE PUBLISHED IN SUCH COUNTY IN A NEWSPAPER THAT CIRCULATES IN THE AREA WHERE THE BUSINESS IS CONDUCTED (BUSINESS & PROFESSIONS CODE 17917).

ANY PERSON WHO EXECUTES, FILES, OR PUBLISHES ANY FICTITIOUS BUSINESS NAME STATEMENT, KNOWING THAT SUCH STATEMENT IS FALSE, IN WHOLE OR IN PART, IS GUILTY OF A MISDEMEANOR AND UPON CONVICTION THEREOF SHALL BE FINED NOT TO EXCEED ONE THOUSAND DOLLARS(\$1,000) (BUSINESS & PROFESSIONS CODE 17930).