

# Abandonment of Fictitious Business Name

This document is filed when a business is no longer conducted under an FBN within 5 years since filing, or the business is sold.\* (BPC §17922, §17924)

\*This document must be filed in the same county as the original FBN Statement.

Publication is Required

The following person(s) has/have abandoned the use of the following fictitious business name(s):

## Fictitious Business Name(s)

A. \_\_\_\_\_ B. \_\_\_\_\_

If more than two (2) names, please use the addendum.

## Business Address

Principal Place of Business: \_\_\_\_\_

Phone Number:

Mailing Address of Business: \_\_\_\_\_

# \_\_\_\_\_

## Registrant Information (Individual, LLC, or Corporation)

Full Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_

## Registrant Information (Individual, LLC, or Corporation)

Full Name: \_\_\_\_\_

Residence Address: \_\_\_\_\_

If more than two (2) names, please use the addendum.

## Original Filing of the FBN Statement

The original FBN Statement, which is now being abandoned, was filed on \_\_\_\_/\_\_\_\_/\_\_\_\_ in the County of Tuolumne under the filed number of # \_\_\_\_\_.

## This Business Is Conducted By:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> An Individual         | <input type="checkbox"/> Joint Venture                               | <input type="checkbox"/> A Limited Liability Company*     | <input type="checkbox"/> An Unincorporated Association Other Than A Partnership |
| <input type="checkbox"/> A Married Couple      | <input type="checkbox"/> State Or Local Registered Domestic Partners | <input type="checkbox"/> A Limited Partnership*           |   |
| <input type="checkbox"/> A General Partnership | <input type="checkbox"/> A Corporation*                              | <input type="checkbox"/> A Limited Liability Partnership* |   |
| <input type="checkbox"/> Copartners            |  | <input type="checkbox"/> A Trust                          |   |

\* = Requires proof of registration with the Secretary of State

## Declaration of Facts

I declare that all information in this statement is true and correct. (A registrant who declares as true any material matter pursuant to Section 17913 of the Business and 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).)

If Corporation or LLC

If Individual, Partner, or Trustee

\_\_\_\_\_  
Printed Name of Manager or Officer, and Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Corporation or LLC

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

## Certification

I hereby certify that the foregoing is a correct copy of the original on file in my office.

Deborah Bautista, Clerk & Auditor-Controller. By: \_\_\_\_\_, Deputy

# Abandonment of Fictitious Business Name

## Instructions

### Important Information

This document is filed when a business is no longer conducted under an FBN within 5 years since filing, or the business is sold.

This document must be filed in the same county as the original FBN Statement

It is required by law to publish this filing.

### Fictitious Business Name(s)

Enter the name(s) of the business with exact spelling. If there are more than two (2) names, use the Fictitious Business Name Addendum.

All business names on one statement must have the same business address and registrants.

### Business Address

Enter the street address of your principal place of doing business in California, the mailing address for your business, and phone number. This office will send all information to the mailing address provided.

### Registrant Information (Individual, LLC, or Corporation)

Enter the full name and residence address (do not use a mailing address) of each owner, partner, or trustee, or full name and address of the corporation or limited liability company as registered with the Secretary of State.

If there are more than two (2) names, use the Fictitious Business Name Addendum.

### Original Filing of the FBN Statement

Enter the date and filing number of the original Fictitious Business Name Statement which is now being abandoned.

### This Business Is Conducted By:

Indicate the method of doing business that best describes your organization. A corporation, limited liability company or partnership, or limited partnership must be registered as such with the Secretary of State.

### Declaration of Facts

The declaration must be signed by at least one registrant declaring the statement is true and correct. Per BPC 17913, any registrant who declares as true any material they know to be false is guilty of a misdemeanor punishable by a fine up to \$1,000. If a Corporation or LLC, it must be signed by a manager or officer. Otherwise it must be signed by a registrant listed on the statement.

**Payment:** If paying by check or money order, make payable to the "Tuolumne County Clerk".

**Filing By Mail:** If filing by mail, include a self-addressed stamped envelope.