



KRISTIN B. CONNELLY
CONTRA COSTA CLERK-RECORDER
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This space for Clerk's use only

☐ Original ☐ New Filing (Change in Facts) ☐ Refile (No Change in Facts) Expires: _____ ☐ ID Checked ☐ Received by Mail

FILING FEE: \$55.00 - \$5.00 per each additional Business Name or Registrant Owner

FICTITIOUS BUSINESS NAME STATEMENT

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

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

City State Zip Code County City State Zip Code

*** 1. REGISTRANT NAME & BUSINESS MAILING ADDRESS

Name

Street Address (PO Box, Postal Facility or PMB Allowed)

City, State & Zip Code

*** 2. REGISTRANT NAME & BUSINESS MAILING ADDRESS

Name

Street Address (PO Box, Postal Facility or PMB Allowed)

City, State & Zip Code

*** 3. REGISTRANT NAME & BUSINESS MAILING ADDRESS

Name

Street Address (PO Box, Postal Facility or PMB Allowed)

City, State & Zip Code

*** 4. REGISTRANT NAME & BUSINESS MAILING ADDRESS

Name

Street Address (PO Box, Postal Facility or PMB Allowed)

City, State & Zip Code

Note: If more than Four Registrants, attach additional Sheet

**** This business is conducted by:

- ☐ An Individual ☐ A General Partnership ☐ A Limited Liability Company, State of Organization: _____
☐ A Married Couple ☐ A Limited Partnership ☐ A Corporation, State of Incorporation: _____
☐ Copartners ☐ A Trust ☐ A Limited Liability Partnership: _____
☐ Joint Venture ☐ State/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)

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).)

Print Name of Signer. If Corporation or LLC, also print title of Officer/Manager.

Signature of Registrant

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 BUSINESS MAILING 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.

KRISTIN B. CONNELLY, COUNTY CLERK-RECORDER

BY: _____ DEPUTY CLERK