

STATEMENT OF ABANDONMENT OF USE OF FICTITIOUS BUSINESS NAME STATEMENT NEVADA COUNTY CLERK-RECORDER

Filing Fees: \$30.00

Mail To: Nevada County Clerk-Recorder
950 Maidu Ave Ste. 210
Nevada City, CA 95959

Before Completing Statement read instructions on reverse side

The Registrant(s) listed below have abandoned the use of the following Fictitious Business Name(s)

1.

Your Business Name here: _____

Your Business Name here: _____

Principal Place of Business:

2.

Street Address (DO NOT USE PO BOX OR PRIVATE MAIL BOX ADDRESS) _____

Mailing Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

County of Principal Place of Business: _____

Registered Owner(s) (Person, Corporation or LLC Name)

Registered Owner(s) (Person, Corporation or LLC Name)

3.

Full Name of Owner _____

Full Name of Owner _____

Business Mailing Address or Same as Business Mailing Address _____

Business Mailing Address or Same as Business Mailing Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

If more than 2 registered owners attach additional page showing registered owner information

Business Conducted By: Check only one box

4.

- AN INDIVIDUAL
- MARRIED COUPLE
- A CORPORATION, STATE OF _____
- A TRUST
- A LIMITED LIABILITY COMPANY, STATE OF _____
- A JOINT VENTURE

- GENERAL PARTNERSHIP
- A LIMITED PARTNERSHIP
- COPARTNERS
- A LIMITED LIABILITY PARTNERSHIP
- AN UNINCORPORATED ASSN OTHER THAN PARTNERSHIP
- STATE OR LOCAL REGISTERED DOMESTIC PARTNERS

Business Last Filing Information

5.

The Fictitious Business Name was filed in the County of Nevada on (File Date): _____ File# _____

6.

"I declare that all information in this statement is true and correct"
(A registrant who declares as true information which he or she knows to be false is guilty of a crime)

Signature _____

Print name _____

This Statement was filed with the
County Clerk-Recorder of Nevada
County on the date indicated by file
stamp above.

Clerk Use Only

I hereby certify that this copy is a correct copy of the original on file in my office
Armando Salud-Ambriz, Nevada County Clerk-Recorder

By: _____ Deputy