



CLERK-RECORDER COUNTY OF MONO

P.O. BOX 237, BRIDGEPORT, CALIFORNIA 93517
(760) 932-5530 • FAX (760) 932-5531

Shannon Kendall
Mono County Clerk-Recorder

ABANDONMENT OF FICTITIOUS BUSINESS NAME INFORMATION

Abandonment of Name: Fee

\$ 7.50

Please complete the abandonment application and send to: The Mono County Clerk's Office, P.O. Box 237, Bridgeport, CA 93517. **Once this document is filed, you will receive:**

- One certified copy
- One for your records
- One copy for you to send for publishing (once per week for four consecutive weeks) in a local weekly newspaper in general circulation:
 - **Mammoth Times: (760) 934-3929**
 - **The Sheet: (760) 924-0048**

Should you have any questions regarding the above information, please do not hesitate to contact our office at (760) 932-5530 or speak directly to Debra VandeBrake at 932-5535.

Sincerely,

Shannon Kendall
Mono County Clerk-Recorder

Mono County Clerk-Recorder

STATEMENT OF ABANDONMENT

Of use of fictitious business name statement

<p>A MAIL FILED DOCUMENTS TO:</p> <p>NAME:</p> <hr/> <p>MAILING</p> <hr/> <p>PHONE: () () ()</p> <hr/>	<p style="text-align: center;">MONO COUNTY CLERK-RECORDER'S FILING STAMP</p> <p style="text-align: center;">* Clerk to enter app. # in section 8A below</p>						
<p>B. Once filed, publish four consecutive weeks in either of Mono County's official newspapers: Mammoth Times (760.934.3929) or The Sheet (760.924.0048)</p>							
<p>THE FOLLOWING PERSONS HAVE ABANDONED THE USE OF THE FICTITIOUS BUSINESS NAME:</p>							
1	<p>Fictitious Business Name(s) 3.</p> <p>1. Articles of Incorporation or Organization Number (if applicable)</p> <p>2.</p>						
2.	<p>Street Address, City, & State of Principal Place of Business in CA Zip Code</p>						
4	<p>Full Name of Registrant (if corporation or limited liability company- show state of incorporation or organization)</p> <hr/> <p>Mailing Address City State Zip Code</p>						
4a	<p>Full Name of Registrant (if corporation or limited liability company- show state of incorporation or organization)</p> <hr/> <p>Mailing Address City State Zip Code</p>						
4b	<p>Full Name of Registrant (if corporation or limited Liability company- show state of incorporation or organization)</p> <hr/> <p>Mailing Address City State Zip Code</p>						
5	<p>THIS BUSINESS IS () an individual () joint venture () a limited partnership () an unincorporated assoc. CONDUCTED BY- () married couple () a corporation () a general partnership other than a partnership CHECK ONLY ONE () co-partners () a business trust () a limited liability co. () Other:</p>						
7	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">If Registrant is not a corporation, sign:</td> <td style="width: 40%;">7A If Registrant is a Corp/limited liability, sign:</td> </tr> <tr> <td>SIGNATURE TYPE OR PRINT NAME</td> <td>CORP. OR LIMITED LIABILITY CO. NAME</td> </tr> <tr> <td>SIGNATURE TYPE OR PRINT NAME</td> <td>SIGNATURE/TITLE</td> </tr> </table>	If Registrant is not a corporation, sign:	7A If Registrant is a Corp/limited liability, sign:	SIGNATURE TYPE OR PRINT NAME	CORP. OR LIMITED LIABILITY CO. NAME	SIGNATURE TYPE OR PRINT NAME	SIGNATURE/TITLE
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SIGNATURE TYPE OR PRINT NAME	CORP. OR LIMITED LIABILITY CO. NAME						
SIGNATURE TYPE OR PRINT NAME	SIGNATURE/TITLE						
8	<p>Filing Fees: Abandonment \$7.50. Mail COMPLETED abandonment form, with payment, to: Mono County Clerk's Office, P.O. Box 237, Bridgeport, CA 93517 (760) 932-5535. A copy will be provided to you for publishing (see section B for more information).</p>						
8a.	<p style="text-align: center;">I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.</p> <p style="text-align: center;">Shannon Kendall , MONO COUNTY CLERK</p> <p style="text-align: center;">by</p> <p style="text-align: center;">() Deputy () Assistant</p>						
File #	.						

