## **INSTRUCTIONS FOR FICTITIOUS BUSINESS NAME (FBN) STATEMENT**

The form must be legible – no erasures or whiteouts. Strikeovers acceptable if accompanied with initials.

### Fictitious Business Name Statement Fee Schedule

Filing:	\$42.00	Includes one business name and one business owner on statements
Additional Owner(s):	\$5.00	This fee is exempt to include the name of a spouse when transacting business as a married couple
Additional Business Name(s):	\$5.00	Fee applies to additional business names on statement at the same physical location
Additional Copies:	\$2.00 (1 <sup>st</sup> page)	First page and second page fees apply only to the same document
	\$0.05 (2 <sup>nd</sup> page)	Additional <b>\$1.00</b> fee for a certification of copy

- 1. IN PERSON: Registrants will be required to present a completed FBN statement, and show a valid government issued identification.
- 2. BY MAIL: Registrant will be required to submit a completed FBN statement.
- 3. OTHER: Persons presenting FBN statement on behalf of the registrant in person must show a valid government issued identification.

#### **Business and Professions Code Section 17913**

2.

- 1. Where (1) appears in the form on the frontside:
  - a. Insert the fictitious business name or names.
    - b. Only those businesses operated at the same address and under the same ownership may be listed on one statement.
  - Where (2) appear in the form on the frontside:
    - a. If the registrant has a place of business in this state, insert the **street address**, and **county**, of his or her principal place of business in this state.
    - b. If the registrant has no place of business in this state, insert the **street address, and county** of his or her principal place of business outside this state.
    - c. Mail Box and Post Office Box Numbers are not acceptable as a business address.
- 3. Where (3) appear in the form on the frontside:
  - a. If the registrant is an individual, insert his or her full name and residence address.
  - b. If the registrants are a married couple, insert the full name and residence address of both parties to the marriage.
  - c. If the registrant is a general partnership, co-partnership, joint venture, limited liability partnership, or unincorporated association other than a partnership, insert the full name and residence address of each general partner. Two or more names must be listed as the registrants.
  - d. If the registrant is a limited partnership, insert the full name and residence address of each general partner.
  - e. 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 California Secretary of State, and the state of organization.
  - f. If the registrant is a trust, insert the full name and residence address of each trustee.
  - g. 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 California Secretary of State, and the state of incorporation.
  - h. If the registrants are state or local registered domestic partners, insert the full name and residence address of each domestic partner.
- 4. Where (4) appear in the form on the frontside:
  - a. Indicate which of the terms best describes the nature of the business.
- 5. Where **(5)** appear in the form on the frontside:
  - a. Insert the date on which the registrant first commenced to transact business under the Fictitious Business Name or names listed, if already transacting business under that name or names.
  - b. If the registrant has not yet commenced to transact business under the Fictitious Business Name or names listed, mark the box "not applicable".
- 6. If the registrant is a Corporation, acceptable officer titles include President, Vice President, Secretary, Treasurer, CEO, CFO, COO. If the registrant is an LLC, acceptable officer titles include President, Vice President, Treasurer, CEO, CFO, COO, Member, Managing Member, and Manager.

## **Business and Professions Code Section 17914**

- 1. The statement shall be signed as follows:
  - a. If the registrant is an individual, by the individual.
  - b. If the registrants are a married couple, by either party to the marriage.
  - c. If the registrant is a general partnership, limited partnership, limited liability partnership, copartnership, joint venture, or unincorporated association other than a partnership, by a general partner.
  - d. If the registrant is a limited liability company, by a manager or officer.
  - e. If the registrant is a trust, by a trustee.
  - f. If the registrant is a corporation, by an officer.
  - g. If the registrant is a state or local registered domestic partnership, by one of the domestic partners.

#### **Business and Professions Code Section 17915**

The fictitious business name statement shall be filed with the clerk of the county in which the registrant has his or her principal place of business in this state or, if the registrant has no place of business in this state, with the Clerk of Sacramento County. Nothing in this chapter shall preclude a person from filing a fictitious business name statement in a county other than that where the principal place of business is located, as long as the requirements of this subdivision are also met.

#### **Business and Professions Code Section 17917**

Publication for Original, New Filings (renewal with change in facts from previous filing), or Refile

- 1. Within 30 days after a fictitious business name statement has been filed, the registrant shall cause it to be published in a newspaper of general circulation in the county where the fictitious business name statement was filed or, if there is no such newspaper in that county, in a newspaper of general circulation in an adjoining county. If the registrant does not have a place of business in this state, the notice shall be published in a newspaper of general circulation in Sacramento County. The publication must be once a week for four successive weeks and an affidavit of publication must be filed with the county clerk where the fictitious business name statement was filed within 30 days after the completion of the publication.
- 2. If a refiling is required because the prior statement has expired, the refiling need **not** be published, unless there has been a change in the information required in the expired statement, provided the refiling is filed **within** 40 days of the date the statement expired.

#### **Business and Professions Code Section 17922**

The statement expires upon filing and publication of a statement of Abandonment.

#### **Business and Professions Code Section 17923**

The statement does not expire if a withdrawing partner files and publishes a statement of withdrawal and all other facts remain as originally filed.

#### **Business and Professions Code Section 17930**

Any person who executes, files, or publishes any statement under this chapter, knowing that such statement is false, in whole or in part, shall be guilty of a misdemeanor and upon conviction thereof shall be punished by a fine not to exceed one thousand dollars (\$1,000).

CC230 (Rev. 6/1/21)

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Office Use Only



Ernest J. Dronenburg, Jr. County of San Diego Recorder/County Clerk www.sdarcc.com

# FICTITIOUS BUSINESS NAME STATEMENT

All information on this statement is public information and is required to appear in the newspaper pursuant to Business and Professions Code 17913

(1) FICTITIOUS BUSINESS NAME(S): (If more than two names, use FBN Additional Business Name form)

	LOCATED AT:	/									
		Street Address (No PO Box, Postal Facility or PMB) Mailing Address			City City		Zip Code	County (N	County (No Abbreviation:		
							State		Zip Code		
	REGISTRANT N	IAME AND ADDRESS (If C	orporation/LLC, name, and address	registered with Secreta	ary of State) If	more than two re	egistrants, use F	BN Additional	Registrants fo		
ı.	Full Name (Individ	dual, Corp., LLC, General Partne	r, Trustee, etc.)								
	Street Address (N	No P.O. Box or Postal Mailbox	Facilities)		/	City	/State	/	Zip Code		
	If Corporation or	LLC – Print State of Incorporation	on/Organization								
	Full Name (Individ	dual, Corp., LLC, General Partne	r, Trustee, etc.)								
	Street Address (N	No P.O. Box or Postal Mailbox	Facilities)		/	City	/State	/	Zip Code		
	If Corporation or	LLC – Print State of Incorporatio	on/Organization								
	A. B. C.	S IS CONDUCTED BY: (Please check one)   . Individual E. Joint Venture   . Married Couple F. Corporation   . General Partnership G. Trust   . Limited Partnership H. Co-Partners									
		RST BEGAN TO TRANSA	CT BUSINESS UNDER THE NA			TE DATE <b>(MM/</b>	DD/YYYY) OF	- •	a future dat		
	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).)										
	Registrant Signat	(Original/Wet	Signature Required	Printed Na		,	int name of S	0 ,			
	•		(LLC), Limited Partnership (LP)		•	(LLP), the follow	wing must be	also be com	pleted:		
	Corporation /LLC I	Name:		Officer Title of	Signer:	(For list of acce	ptable titles.	see instructio	ons #6)		

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)