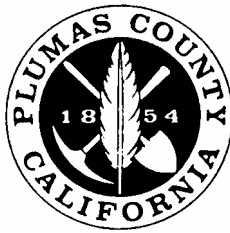


KATHLEEN WILLIAMS

COUNTY CLERK
520 Main Street, Room 102
Quincy, CA 95971



This statement was filed in the office of
KATHLEEN WILLIAMS, County Clerk
of Plumas County,
on

By: _____ Deputy

Filing Fee: \$10.00

FICTITIOUS BUSINESS NAME STATEMENT OF ABANDONMENT

PUBLICATION REQUIRED WITHIN 30 DAYS

Original FBN Number:
Original Filing Date:
Statement Expires On:
Began Transacting Business:
Business is Conducted By:

Business Address:

Phone:

THE FOLLOWING PERSON(S) HAS (HAVE) ABANDONED THE USE OF THE FICTITIOUS BUSINESS NAME(S):

Fictitious Business Name(s):

Registrant Address(es):

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.)

Registrant other than an individual to sign below:

Signature _____
Print Name _____

Signature _____
Title _____
Print Officer's Name _____

I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

KATHLEEN WILLIAMS
Plumas COUNTY CLERK

By: _____ Deputy