

**NOTARY FORM PROVIDED BY LA COUNTY MUST BE NOTARIZED  
AND RETURNED WITH DBA FORM!**  
**(THE SIGNAL now has a notary on staff = call for hours of operation = Standard CA Fee \$10)**

**EFFECTIVE January 1, 2014, pursuant to Assembly Bill 1325, the Los Angeles County Registrar-Recorder/County Clerk will require a completed Affidavit of Identity form to accompany any Fictitious Business Name Statement (Original, Refile, New).** The Los Angeles County Registrar-Recorder/County Clerk no longer accepts handwritten Fictitious Business Name Statements. The attached DBA Packet includes all the necessary forms to complete the process, including the form for notarization. The PDF is interactive and if your software will allow, you can type in the information (READ INSTRUCTIONS), print out the forms, sign where appropriate in front of a notary, hand deliver or mail to The SIGNAL. Payment accepted: cash, credit card, money order, or preprinted check with current information and valid CA DL (make check payable to the SIGNAL).

If the SIGNAL does the filing, publishing, and providing a proof of pub, the fee is \$158 (includes county filing fee) for one business name and one registrant (additional \$5 fee per business name or per registrant). Our courier service goes once a week to Van Nuys LA Clerk's office (all required paperwork must be in the SIGNAL office by noon on Thursday for drop off one week – usually on a Monday & pick up the following week).

If you do the filing yourself, you will receive the form back from the county clerk's office and it will have a number in the right hand top corner and a stamped seal (usually purple). Scan and email the front page with the number on it to [dba@signalscv.com](mailto:dba@signalscv.com) or mail, fax, or bring a copy into the office to begin the publishing process. The SIGNAL will publish your DBA once a week for 4 weeks as required and mail a proof of publication for the fee of \$100.

NOTICE(DBA=Doing Business As) FICTITIOUS BUSINESS NAME STATEMENT. NEW BUSINESSES must file a Fictitious Business Name Statement with the County Clerk & publish it in a qualified newspaper (the newspaper should circulate in the area where the business is to be conducted). CA Business & Professions §Code 17917b. EXISTING BUSINESSES must RE-FILE every 5 years. The SIGNAL is an adjudicated newspaper for Los Angeles County.

If your DBA has expired, it would be filed as an "Original Filing". If you are filing for a renewal, provide the last copy of your filed DBA. If you are filing as a corporation, LLC, etc, provide paperwork: the Articles of Incorporation or Organization Number (AI#ON). This link will take you to the California Secretary of State site STATUS REPORT INFO: <http://kepler.sos.ca.gov/> Under Business Programs, type in your Corp, LLC name or Entity # & it will pull up Business Search – Results (print a copy). Then click on the Entity Name & it will pull up the Business Entity Detail (print a copy). Bring these in with your DBA & Notary forms. Check the instructions provided to be sure you are filing & signing correctly. There are specific rules for Individual, Corp, LLC, Partnerships, etc. The county is unforgiving for errors. ANY QUESTIONS? LAVOTE.NET

NOTE: The SIGNAL does not provide legal advice on the structure, format or other requirements for filing a DBA and will not be responsible for errors, inaccuracies or other omissions legally required. •Name Search info 800-952-5232 or [http://www.lavote.net/clerk/FBN\\_Results.cfm](http://www.lavote.net/clerk/FBN_Results.cfm) •LA County Clerk 800-201-8999 •Business License info 661-253-7342 •Secretary of State (Incorporate or Trademark info) 213-897-3062. •The SIGNAL, 24000 Creekside Rd, Valencia, CA 91355. PO Box 801870, Santa Clarita, CA 91380-1870. (661) 259-1234. [dba@signalscv.com](mailto:dba@signalscv.com)

~ Linda Kerr [dba@signalscv.com](mailto:dba@signalscv.com) /Ph 661.287.5569 /Fax 661.254.8068 /24000 Creekside Road, Santa Clarita 91355





DEAN C. LOGAN  
Registrar-Recorder/County Clerk

**January 1, 2014**

**TO:** All Customers

**FROM:** Jaime Pailma, Division Manager  
Document Recording Division – Business Filing and Registration Section

**SUBJECT: Affidavit of Identity Form Requirement (AB 1325)**

Effective January 1, 2014, pursuant to Assembly Bill 1325, the Los Angeles County Registrar/Recorder County Clerk's Office will require a completed Affidavit of Identity form to accompany the 2014 Fictitious Business Name Statement (Original, Refile and New).

- a. **In-Person:** Registrants are required to present a completed FBN statement, show valid identification and complete the Affidavit of Identity form (Page 4 of this package).
- b. **Mail-in:** Registrants are required to submit a completed FBN statement, and notarized Affidavit of Identity form.
- c. **Other:** Persons presenting FBN statements on behalf of the registrant must show valid identification, and the complete Affidavit of Identify form and Authorized Agent form, where applicable. (Page 5 of this package).
- d. If the registrant is a corporation, a limited liability company, or a limited liability partnership an original certificate of Status issued by the Secretary of State (SOS) must be attached (A current print out from the SOS may be acceptable).

Please note that no additional fee will be charged.

This requirement has been made in accordance with the legislative amendment of Business and Professions Code sections 17913, 17916, 17922, 17923, 17927 and 17929.

YOUR RETURN MAILING ADDRESS

LOS ANGELES  
REGISTRAR-RECORDER/ COUNTY CLERK

NAME:

ADDRESS:

CITY: STATE: ZIP CODE:

### FICTITIOUS BUSINESS NAME STATEMENT

TYPE OF FILING AND FILING FEE (Check one)

- Original- **\$26.00** (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)
  - New (Amended) Filing- **\$26.00** (CHANGES IN FACTS FROM ORIGINAL FILING- REQUIRES PUBLICATION)
  - Refile- **\$26.00** (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)
- \$5.00-** FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT THE SAME LOCATION **\$5.00-** FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

#### The following person(s) is (are) doing business as:

\* 1. \_\_\_\_\_ 2. \_\_\_\_\_  
Print Fictitious Business Name(s)

\*\* \_\_\_\_\_  
Street address of principal place of business Mailing address if different

City State Zip COUNTY City State Zip

Articles of Incorporation or Organization Number (if applicable): At #ON \_\_\_\_\_

#### \*\*\* REGISTERED OWNER(S):

1. \_\_\_\_\_  
Full Name/Corp/LLC (P.O. Box not accepted)

\_\_\_\_\_  
Residence Address

City State Zip

\_\_\_\_\_  
If Corporation or LLC – Print State of Incorporation/Organization

3. \_\_\_\_\_  
Full Name/Corp/LLC (P.O. Box not accepted)

\_\_\_\_\_  
Residence Address

City State Zip

\_\_\_\_\_  
If Corporation or LLC – Print State of Incorporation/Organization

2. \_\_\_\_\_  
Full Name/Corp/LLC (P.O. Box not accepted)

\_\_\_\_\_  
Residence Address

City State Zip

\_\_\_\_\_  
If Corporation or LLC – Print State of Incorporation/Organization

4. \_\_\_\_\_  
Full Name/Corp/LLC (P.O. Box not accepted)

\_\_\_\_\_  
Residence Address

City State Zip

\_\_\_\_\_  
If Corporation or LLC – Print State of Incorporation/Organization

IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING OWNER INFORMATION

#### \*\*\*\* THIS BUSINESS IS CONDUCTED BY: (Check one)

- an Individual  a General Partnership  a Limited Partnership  a Limited Liability Company
- an Unincorporated Association other than a Partnership  a Corporation  a Trust  Copartners
- a Married Couple  Joint Venture  State or Local Registered Domestic Partners  a Limited Liability Partnership

\*\*\*\*\* The date registrant commenced to transact business under the fictitious business name or names listed above on \_\_\_\_\_  
(Insert N/A above if you haven't started to transact business)

**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/CORP/LLC NAME (PRINT) \_\_\_\_\_ TITLE \_\_\_\_\_

REGISTRANT SIGNATURE \_\_\_\_\_ IF CORP OR LLC, PRINT NAME \_\_\_\_\_

#### If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

This statement was filed with the County Clerk of LOS ANGELES on the date indicated by the filed stamp in the upper right corner.

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 RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. EFFECTIVE JANUARY 1, 2014, THE FICTITIOUS BUSINESS NAME STATEMENT MUST BE ACCOMPANIED BY THE AFFIDAVIT OF IDENTITY FORM.

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).

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

DEAN C. LOGAN, LOS ANGELES COUNTY CLERK

BY: \_\_\_\_\_, Deputy

## INSTRUCTIONS FOR COMPLETION OF STATEMENT

Business and Professions Code Section 17913:

\* Where one asterisk appears in the form:

- (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 two asterisks appear in the form:

- (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 and file with the Clerk of Sacramento County (B&P 17915)
- (c) Mail Box and Post Office Box Numbers **are not acceptable** as a business address when used alone without a street address

\*\*\* Where three asterisks appear in the form:

- (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, copartnership, joint venture, limited liability partnership, or unincorporated association other than a partnership**, insert the full name and residence address of each general partner
- (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 CA 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 CA 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

\*\*\*\* Where four asterisks appear in the form:

- (a) Check whichever of the terms listed on the front of the form best describes the nature of the business

\*\*\*\*\* Where five asterisks appear in the form:

- (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) Insert N/A if you have not yet commenced to transact business under the fictitious business name or names listed

Business and Professions Code Section 17914

The statement shall be signed as follows:

- (a) If the registrant is an individual, by the individual
- (b) If the registrants are husband and wife, by the husband or wife
- (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

- (a) 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.
- (b) 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

Abandonment of Fictitious Business Name

- (a) Upon ceasing to transact business in this state under a fictitious business name that was filed in the previous five years, a registrant who has filed a fictitious business name statement **shall** file a statement of abandonment of use of fictitious business name. The statement of abandonment shall be executed in the same manner as a fictitious business name statement, excluding the requirements of subdivisions (d), (e), and (f) of Section 17913 and shall be filed with the county clerk of the county in which the registrant has filed the fictitious business name statement. The statement shall be published in the same manner as a fictitious business name statement and an affidavit showing its publication shall be filed with the county clerk after the completion of publication.

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).



# Los Angeles County REGISTRAR-RECORDER/COUNTY CLERK

DEAN C. LOGAN  
Registrar-Recorder/County Clerk

## AFFIDAVIT OF IDENTITY – FICTITIOUS BUSINESS NAME STATEMENT

In accordance with Section 17913 of the California Business and Professions Code, the following identifying information is required to file a Fictitious Business Name Statement.

**This certificate must be signed in the presence of a Notary (mail/drop-off) OR Deputy County Clerk (in person)**

Registrant Name \_\_\_\_\_

Name of Business \_\_\_\_\_

Registrant Address \_\_\_\_\_

Street Address

City

State

Zip Code

I, \_\_\_\_\_, certify under penalty of perjury under the laws of the State of California that I am  
(Print Name)  
the registrant filing this Fictitious Business Name Statement and am authorized to submit said statement to the County  
Clerk’s Office for filing. I understand that if I willfully make a false statement on this affidavit, I may be punished by a fine  
not to exceed one thousand dollars (\$1,000).

I declare that all information in this statement is true and correct.

Signed on this date: \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
(Registrant Signature)

If corporation, limited liability company, or limited liability partnership an original “Certificate of Status” issued by the Secretary of State must be attached.

**FOR OFFICE USE ONLY: \*\*\*To be completed by Deputy County Clerk for in-person filings only\*\*\***

ID #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Deputy Signature: \_\_\_\_\_

**\*\*\*For Mail or Third Party Requests Only\*\*\***

STATE OF CALIFORNIA           )  
  ) ss  
County of                          )

Subscribed and sworn to (or affirmed) before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_, by \_\_\_\_\_,  
\_\_\_\_\_ proved to me on the basis of satisfactory evidence to be the person(s) who appeared  
before me.

(Seal)

\_\_\_\_\_  
Signature



DEAN C. LOGAN  
Registrar-Recorder/County Clerk

**TO BE COMPLETED BY AUTHORIZED AGENT**

In accordance with Section 17913 of the California Business and Professions Code, the following identifying information is required to file a Fictitious Business Name Statement.

**The Agent must present ID and sign in the presence of a Deputy County Clerk**

Agent Name \_\_\_\_\_  
First Name Last Name

Fictitious Business Name: \_\_\_\_\_

I, \_\_\_\_\_, certify under penalty of perjury under the laws of the State of California that I am the  
(Print Name)  
authorized agent filing this Fictitious Business Name on behalf of the registrant.

Signed on this date: \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_  
(Authorized Agent Signature)

***To be completed by Deputy County Clerk***

Agent ID # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Deputy Signature \_\_\_\_\_

**To be completed by the Registrant**

I, \_\_\_\_\_, certify under penalty of perjury under the laws of the State of California that I am  
(Print Name)  
the registrant filing this Fictitious Business Name Statement and am authorized to submit said statement to the County Clerk's Office for filing. I understand that if I willfully make a false statement on this affidavit, I may be punished by a fine not to exceed one thousand dollars (\$1,000).

I also declare that I am authorizing the agent listed above to submit this Fictitious Business Name Statement on my behalf.

Signed on this date \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_  
(Registrant Signature)