YOUR RETURN MAILING ADDRESS HAME: SPRTICES cn



FICTITIOUS BUSINESS NAME STATEMENT TYPE OF FILING AND FILING FEE (Check one) Y Original-\$23.50 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT) IN NOW FIRINGS-\$23.00 (CHANGES IN FACTS FROM ORIGINAL

5 F	Refile- \$18.00 (NO CHANG D+ FOR BACH ADDITIONAL	ies in the facts from Origi Business name filed on 8a	ME STATEMENT, DOING HU	Keneseat	THE SAME LOCATION \$	4.00- FOR EACH ADD	OTIONAL OWNER	N EXCESS OF TWO OWN) ERS	
			The following per	son(s)	s (are) doing bus	iness as:		- Trib 67771	irvo	
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Articl	se of Incorporation or Orga	nization Number (if applicable):	AI #ON_					20)		
***	REGISTERED OV	WNER(S);								
1.	Spence	x Pratt		2.						
	Full Name/Corp/LLC				Full Name/Corp/LLC					
					Residence Address					
	City	State	Zio		City		1			
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	in Corporation of LLC - Pr	frit State of tricorporation/Organ	ization	_	if Corporation or ULC -1	Print State of Ingerpor	#Bot/Organization			
3.	Pull Name/CorpALC			. 4.	Full Name/Com/ALC					
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	If Corporation or LLC - Pri	nt State of Incorporation/Organ	ization	•	tf Corporation or LLC F	rint State of Incompan	Bion/Otramization			
***	•	IF MORE THAN FOUR REGISTRANTS, ATTACH ADDITIONAL SHEET SHOWING DWINER INFORMATION								
wn.,,	THIS BUSINESS	16 CONDUCTED BY:								
		☐ a General ated Association other	rarmersnip □ a Ihan a Padharahin	Limited	Partnership a Corporation	a Limited Lia		•		
	D Husband and \	Mife □ Joint Venture	State or Loc	al Regia	tered Domestic Pa			opartners ty Partnership		
www	* The registrant som	anagad to traverse but	and a sure days that the street					_		
	The registrant com	menced to transact busin				franci talà nhous il	0-18-09	(o trensact business)		
		A registrant who dec	that all informational informational information in the contraction of	on in th tion which	ils statement is: :h he or she knows	true and con	ract	•		
REGIS	TRANTS KORPALICNAME	NORM	er Pratt	-	7H4 E	DWNPI	2	,		
REG	STRANT SIGNATUR		0.			e que conserva de la	.47			
		(5)					• • •			
		rint corporate title of county clock of LOS ANGELES								
IN THE	FACTS SET FORTH IN T	TH SUBDIVISION (a) OF SEC FRICE OF THE COUNTY CLEI THE STATEMENT PURSUANT NEW FICTITIOUS SUSINESS	TO SECTION 17419 OTHE	THAN A	MAISION (D) OF SECTIO	N 17920, WHERE IT	40 OF FIVE YEAR EXPIRES 40 DAY:	S PROM THE DATE ON S AFTER ANY CHANGE	_	
THE P		ny does not of Itself au Common Law (see section HAY THIS COPY IS A CO						HTS OF ANOTHER		
		OS ANGELES COUNTY		BY			YATES	_, Deputy		
Rev. O	V200 9	F.O. BOX 53592, LOS ANGE	LES. CA 90063-0692		PH: (562) 462-2177	Ψ	YEB ADDRESS: L/			