

THIS STATEMENT IS A PUBLIC RECORD

STATEMENT OF WITHDRAWAL FROM PARTNERSHIP

TRINITY COUNTY CLERK/RECORDER'S OFFICE
11 COURT STREET/P.O. BOX 1215
WEAVERVILLE, CA 96093-1215

FILING FEE: \$12.00

PLEASE PRINT **LEGIBLY**, IN DARK INK OR TYPE.
SEE REVERSE SIDE FOR INSTRUCTIONS.

STATEMENT OF WITHDRAWAL FROM PARTNERSHIP OPERATING UNDER FICTITIOUS BUSINESS NAME

THE FOLLOWING PERSON(S) HAS/HAVE WITHDRAWN AS GENERAL PARTNERS FROM THE PARTNERSHIP OPERATING UNDER THE FICTITIOUS BUSINESS NAME(S):

1) Fictitious Business Name(s)		Phone Number:	
A:	B:		
2) Street Address of Principal Place of Business (P.O. Box not acceptable)		City	State
			Zip Code:
Name of General Partner (Person, Corporation or LLC name)		Corp or LLC show Registration State	
3) Last:	First:		
Residence Address and P.O. Box	City:	State:	Zip Code:
Name of General Partner (Person, Corporation or LLC name)		Corp or LLC show Registration State	
4) Last:	First:		
Residence Address and P.O. Box	City:	State:	Zip Code:
Name of General Partner (Person, Corporation or LLC name)		Corp or LLC show Registration State	
5) Last:	First:		
Residence Address and P.O. Box	City:	State:	Zip Code:
6) The fictitious business name referred to above was filed on (Date): _____ in the County of Trinity.			
Original File # _____			
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).)			
7) SIGNATURE OF GENERAL PARTNER(S) WITHDRAWING			
Signature	_____	Type or Print Name	_____
Signature	_____	Type or Print Name	_____
Signature	_____	Type or Print Name	_____

**WHEN FILING BY MAIL, PROVIDE SELF ADDRESSED STAMPED ENVELOPE
FOR OFFICE USE ONLY**

CERTIFICATION: I hereby certify that the foregoing is a correct copy of the original on file in my office.
SHANNA S WHITE, County Clerk/Recorder/Assessor By: _____, Deputy

**THE INSTRUCTIONS BELOW ARE NOT TO BE PUBLISHED
(Business and Professions Code Section 17924)**

Section 17923 Business & Professions Code

“(c) Unless a notice of dissolution of the partnership has been published pursuant to Section 15035.5 of the Corporations Code, the statement of withdrawal from partnership operating under a fictitious business name shall be published in the same manner as the Fictitious business Name Statement and an affidavit showing the publication of the statement shall be filed with the county clerk after the completion of the publication.”

“(d) The withdrawal of a general partner does not cause a fictitious business Name Statement to expire if the withdrawing partner files a statement of withdrawal in accordance with subdivisions (a) and (b) and the requirement of subdivision (c) is satisfied.”

INSTRUCTIONS FOR COMPLETION OF STATEMENT

Business & Professions Code Section 17923(B)

The statement shall include:

1. The fictitious business name of the partnership.
2. The street address of its principal place of business in this state or if it has no place of business in this state, the street address of its principal place of business outside this state, if any, as it appears on the original statement.
- 3-5. The full name and residence of the person withdrawing as a partner. It should show the name and address as it appears on the original statement.
6. The date on which the original fictitious business Name Statement for the partnership was filed and the county where filed.
7. The Statement shall be signed by the person withdrawing as a general partner.