YOUR RETURN MAILING ADDRESS

NAME: SUSAN ANN SMITH ADDRESS: 133 MAIN ST.

CITY: ANYWHERE

Rev. 01/2013

STATE: CA

ZIP CODE: 12345

LOS ANGELES REGISTRAR-RECORDER/ COUNTY CLERK

WEB ADDRESS: LAVOTE.NET

FICTITIOUS BUSINESS NAME STATEMENT

_			TYPE OF FILING	3 AND FILE	NG FEE (Check one)						
	Original- \$26.00 (FOR ORIGINAL F	ILING 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)											
□ F \$5.00	Refile- \$26.00 (NO CHANGES IN T 0- FOR EACH ADDITIONAL BUSINE	HE FACTS FROM ORIGINAL F ESS NAME FILED ON SAME S	FILING) TATEMENT DOING BUSIN	ESS AT THE	SAME LOCATION \$5.00-	FOR EACH ADDITIONAL OWN	ER IN EXCESS OF ONE OWNER				
\$ 0.0	G-1 OK EAGH ADDITIONAE BOOME		ne following perso								
		"	ie ionowing perso	11(3) 13 (0	ite, doing basines						
*1.	SMOOTH SAILING	RENTALS		2.							
••-		·	Print Fig	titious Busin	ess Name(s)						
**	133 MAIN ST.				P.O. BOX 100						
_		principal place of business			Mailing ad	dress if different					
ΑN	YWHERE CA	12345	ANY CO	YTNUC	ANYWHERE	CA	12345				
City	State	e Zip	COUNTY		City	State	Zip				
Artic	les of Incorporation or Organization	n Number (if applicable): Al i	*ON			_					
	,	,									
***	REGISTERED OWNER	R(\$):									
1.	SUSAN ANN SMITH			2. B/	ARRY CHASE						
	Full Name/Corp/LLC (P.O. Box r	not accepted)	- · · · · · · · · · · · · · · · · · · ·	Fu	Name/Corp/LLC (P.O. Bo	x not accepted)					
	246 OAK ST.			0 CORPORATE BL							
	Residence Address				sidence Address						
	ANYWHERE	CA	12345		IYWHERE	CA	12345				
	City	State	Zip	Cit	у	State	Zip				
				_							
	If Corporation or LLC - Print Sta	te of Incorporation/Organizat	ion	If C	Corporation or LLC - Print	State of Incorporation/Organi	zation				
2				4.							
3.	Full Name/Corp/LLC (P.O. Box r	net gegented)			II Name/Corp/LLC (P.O. B	ox not accepted)					
	Full Name/Corp/LLC (P.O. Box)	iot accepted)		, ,	ii Haine/Outpieco (i .o. o	, , , , , , , , , , , , , , , , , , ,					
	Residence Address			Re	sidence Address						
	Residence Address			140	olderles / Address						
	City	State	Zip	Cit	у	State	Zip				
	J.I.J										
	If Corporation or LLC - Print State of Incorporation/Organization				if Corporation or LLC - Print State of Incorporation/Organization						
		IF MORE THAN FO	OUR REGISTRANTS, ATTA	ACH ADDITI	ONAL SHEET SHOWING	OWNER INFORMATION					
***	** TUIO DUONICO 10 0			10117100117							
	** THIS BUSINESS IS C	a General P		Limited E	artnership 🗆 a	a Limited Liability Cor	mnany				
	□ an Individual			LIIIMEU F	a Corporation	a Trust	□ Copartners				
	□ an Unincorporated		an a Parmership	l Dominto	red Domestic Partr		Liability Partnership				
	□ a Married Couple	□ Joint Venture	□ State or Loca	i Registe	red Domestic Parti	icis Dariillica	Liability T ditilicionip				
						9	1/1/2009				
***	*** The date registrant con	nmenced to transact bu	siness under the fictiti	ious busin	ess name or names li	sted above on	t started to transact business)				
		l dooloro th	at all information	n in this			(Straited to fightseed pasitiess)				
	10	I deciare III Podestrant who decial	res as true informatio	on which	he or she knows to	be false is guilty of a	crime.)				
	\ <i>r</i>	-		• • • • • • • • • • • • • • • • • • • •			,				
REG	SISTRANT/CORP/LLC NAME (PRINT) SUSAN ANN SI	MITH		TITLE_OWN	<u>IER</u>	<u> </u>				
		1 110	South 1500		O DOINT MAME						
RE	GISTRANT SIGNATURE _	(MAMI)	evyuric if co	DRP OR L	LC, PRINT NAME						
lf o	orporation, also print	corporate title of o	officer If LLC, als	so print	title of officer or	manager.					
		. OL . CLOS MISSELES .	the determination of builton	filad ctamp	is the upper right comer						
NOT	FICE - IN ACCORDANCE WITH S	SUBDIVISION (a) OF SECTIONS	ON 17920, A FICTITIOUS I	NAME STAT	EMENT GENERALLY EX (ISION (b) OF SECTION 1	1920. WHENCH LAFTING	E YEARS FROM THE DATE ON 40 DAYS AFTER ANY CHANGE				
IN T	THE FACTS SET FORTH IN THE S A REGISTERED OWNER. A NEV	STATEMENT PURSUANT IN V FICTITIOUS BUSINESS N	AME STATEMENT MUST	BE FILED 8	EFORE THE EXPIRATION	N.					
T. 15	CHINA OF THE STATEMENT F	OCE NOT OF ITSELF ALITH	ORIZE THE USE IN THIS	STATE OF	A FICTITIOUS BUSINES		THE RIGHTS OF ANOTHER				
UNE	SEN ECOCOMI CENTO AD CAM	IMON I AM/YSEE SECTION 1	14411 FT SEO BUSINES	S AND PRO	PESSIONS CODE).						
	I HEREBY CERTIFY THAT	THIS COPY IS A COR	RECT COPY OF THE	: ORIGIN	AL STATEMENT ON	FILE IN INT OFFICE.					
	DEAN C. LOGAN, LOS	ANGELES COUNTY O	CLERK	BY:		_ <u></u>	, Deputy				
	<u></u>			_							

P.O. BOX 1208, NORWALK, CA 90651-1208

PH: (562) 462-2177

YOUR RETURN MAILING ADDRESS

NAME: BARRY CHASE ADDRESS: 133 MAIN ST.

CITY: ANYWHERE

Rev. 01/2013

STATE: CA

P.O. BOX 1208, NORWALK, CA 90651-1208

ZIP CODE: 12345

LOS ANGELES
REGISTRAR-RECORDER/ COUNTY CLERK

WEB ADDRESS: LAVOTE.NET

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 perso	n(s) is (a	re) doing busine	ss as:					
*1.	SMOOTH SAILING R	RENTALS	Oriot File	2.	on Nama(a)						
Print Fictitious Business Name(s) ** 133 MAIN ST. P.O. BOX 100											
Street address of principal place of business Mailing address if different											
AN	YWHERE CA	12345	ANY CO		ANYWHERE	CA	12345				
City	State	Zip	COUNTY	•	City	State	Zip				
Artic	les of Incorporation or Organization I	Number (if applicable): Al #0	DN		<u>.</u>						
***	REGISTERED OWNER(S):									
1.	LONG CORPORATION	•		2. BI	EACH LLC						
	Full Name/Corp/LLC (P.O. Box not	accepted)			I Name/Corp/LLC (P.O. E						
	246 OAK ST.				110 CORPORATE BLVD.						
	Residence Address	C4	40046		sidence Address	CA	12345				
	ANYWHERE City	CA State	12345 Zip	Cit	YWHERE	State	Zip				
	Oily	Oldic	Lip	2	,	•	•				
	If Corporation or LLC - Print State	of Incorporation/Organization	n	If (corporation or LLC - Print	State of Incorporation/Organ	zation				
3.	4			4.							
J.	Full Name/Corp/LLC (P.O. Box not	accepted)			Name/Corp/LLC (P.O. E	Box not accepted)					
				_							
	Residence Address			Re	sidence Address						
	City	State	Zip	Cit	у	State	Zip				
	If Corporation or LLC - Print State of Incorporation/Organization			If (If Corporation or LLC - Print State of Incorporation/Organization						
		IF MORE THAN FOU	R REGISTRANTS, ATTA	ACH ADDITI	ONAL SHEET SHOWING	OWNER INFORMATION					
***	** THIS BUSINESS IS CO	NDUÇTED BY: (Che	eck one)								
	□ an Individual	a General Par		Limited F	'	a Limited Liability Cor	•				
	□ an Unincorporated A				□ a Corporation	□ a Trust	☐ Copartners				
	□ a Married Couple	□ Joint Venture	□ State or Loca	i Registe	red Domestic Part	ners 🗆 a Limited	Liability Partnership				
***	***					istad abaya an	/1/2009				
	*** The date registrant comm	nenced to transact busi	ness under the ticilii	ious busin	ess name or names (nsert N/A above if you haven'	started to transact business)				
	(A -					ue and correct. be false is guilty of a	crime.)				
	•	BARRY CHASE	3 43 440 1110111120	VII 17111511		OF LONG CORPORATION					
REG	ISTRANT/CORP/LLC NAME (PRINT)		0								
RE	GISTRANT SIGNATURE	Barry-Chi	WE IF CO	RP OR L	LC, PRINT NAME						
This	orporation, also print c	Clock of LOS ANGELES on	the date indicated by the	filed stamp	in the upper right corner.						
NOT WH	STATEMENT WAS THE WHIT THE COUNTY TICE - IN ACCORDANCE WITH SUI ICH IT WAS FILED IN THE OFFICE HE FACTS SET FORTH IN THE STA A REGISTERED OWNER. A NEW F	BDIVISION (a) OF SECTION OF THE COUNTY CLERK, I ATEMENT PURSUANT TO	I 17920, A FICTITIOUS I EXCEPT, AS PROVIDED SECTION 17913 OTHER	NAME STAT O IN SUBDIN R THAN A C	EMENT GENERALLY EX 1SION (b) OF SECTION HANGE IN THE RESIDEI	NCE ADDRESS	E YEARS FROM THE DATE ON 40 DAYS AFTER ANY CHANGE				
THE	FILING OF THIS STATEMENT DOI DER FEDERAL, STATE, OR COMMO I HEREBY CERTIFY THAT T	ON LAW (SEE SECTION 14	411 FT SEQ BUSINES:	S AND PRO	FESSIONS CODE).		HE RIGHTS OF ANOTHER				
	DEAN C. LOGAN, LOS A	NGELES COUNTY CL	<u>ERK</u>	BY:	<u> </u>		, Deputy				

PH: (562) 462-2177