

921373

OFFICE OF THE SONOMA COUNTY CLERK  
600 Administration Dr., Rm 101J  
Post Office Box 11187  
Santa Rosa, California 95406

This space for use of County Clerk

**FILED**

APR 6 1992

SONOMA COUNTY CLERK  
BY **RICK SNYDER**  
Deputy Clerk

ASSIGNED FILE NO. \_\_\_\_\_

SEE REVERSE SIDE  
FOR INSTRUCTIONS

New Fictitious Business Name Statement

Refile - Statement expires December 31, \_\_\_\_\_

Previous File No. \_\_\_\_\_

**FILING FEE**

\$20.00 - FOR FIRST BUSINESS NAME ON STATEMENT  
 \$ 5.00 - FOR EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT AND DOING BUSINESS AT THE SAME LOCATION  
 \$ 5.00 - FOR EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER

**FICTITIOUS BUSINESS NAME STATEMENT**

THE NAME(S) OF THE BUSINESS(ES)

\* Y BUY 4N ENTERPRISES

Print Fictitious Name(s)

\*\* LOCATED AT 1500 BAUMGARDNER LANE | SAME

Street address of business. If no street address is assigned, give exact location of business plus P.O. Box or Rural Route

Mailing Address

IN SANTA ROSA 95404 | SAME

City and Zip

City and Zip

IS (ARE) HEREBY REGISTERED BY THE FOLLOWING OWNER(S):

\*\*\* ① KEITH HALLOCK

Full Name

1500 BAUMGARDNER LANE

Residence Address

SANTA ROSA CA 95404

City State Zip

584-9228

Zip

If Corporation, show state of incorporation

② \_\_\_\_\_

Full Name

\_\_\_\_\_

Residence Address

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

If Corporation, show state of incorporation

\*\*\* ③ \_\_\_\_\_

Full Name

\_\_\_\_\_

Residence Address

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

If Corporation, show state of incorporation

④ \_\_\_\_\_

Full Name

\_\_\_\_\_

Residence Address

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

\_\_\_\_\_

City State Zip

If Corporation, show state of incorporation

If more than 4 Registrants, attach additional sheet showing owner information.

\*\*\*\* This business is conducted by:  an Individual  Individuals - Husband and Wife  a General Partnership  
 a Limited Partnership  a Corporation  a Business Trust  Co-Partners  a Joint Venture  
 an Unincorporated Association - other than a Partnership  Other (Specify) \_\_\_\_\_

\*\*\*\* The registrant commenced to transact business under the fictitious name or names above on 4/6/92 B & P 17913

SIGNATURE OF REGISTRANT Keith Hallock  
KEITH HALLOCK

Print name of person signing and, if a corporate officer, also state title.

**IN ALL COMMUNICATIONS WITH THE OFFICE OF THE COUNTY CLERK  
YOU MUST ENCLOSE A STAMPED, SELF-ADDRESSED ENVELOPE FOR OUR REPLY.**

This statement was filed with the County Clerk of SONOMA COUNTY on the date indicated by the file stamp above.

**NOTICE--THIS FICTITIOUS BUSINESS NAME STATEMENT EXPIRES FIVE YEARS FROM THE DATE IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THAT TIME. THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14400 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.

EEVE T. LEWIS  
COUNTY CLERK

By \_\_\_\_\_ Deputy