

LOS ANGELES COUNTY REGISTRAR-RECORDER/COUNTY CLERK

AFFIDAVIT OF IDENTITY - FICTITIOUS BUSINESS NAME STATEMENT

If submitting the Fictitious Business Name Statement by <u>MAIL</u> or through a <u>THIRD PARTY</u>, the registered owner <u>MUST</u> bring this page to a notary to be <u>NOTARIZED</u>. 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.

Registrant Name	SUSAN SMITH		
Name of Business	SMOOTH SAILING RENTALS		
Business Mailing Address	12400 IMPERIAL HIGHWA	ΛY	
	Street Address		
	NORWALK City	CA	90650 State/Country Zip Code
	Gity		State/Country Zip Code
Registrant Signature	Registrant's Signature		
			nited liability partnership, the county nce and good standing of that business
	For Mail or Third I	Party Requests Only	
This certificate must be notarized by a Notary Public for all Mail and Third Party Submissions			
	fficer completing this certificate ve hich this certificate is attached, ar		
STATE OF CA County of Los Angeles	_)) ss)		
Subscribed and sworn to (or a	affirmed) before me on this 1	_{day of} January	, 20 <u>24</u> , by
Susan Smith	, proved to me on the	basis of satisfactory evide	ence to be the
person(s) who appeared befo	ore me.		
Notary Public's Signature		(Seal)	
Signature		Clear Notal	ry Seal
FOR OFFICE US	E ONLY: *** To be completed by	y Deputy County Clerk fo	or in-person filings only***
ID #:	Exp. Date:	Deputy Signature:	