Mark Church
OFFICE OF
ASSESSOR-COUNTY CLERK-RECORDER & ELECTIONS
COUNTY OF SAN MATEO
555 COUNTY CENTER, REDWOOD CITY, CA 94063
P 650.363.4500 F 650.599.7458 email COUNTYCLERK@SMCACRE.GOV web HTTPS://WWW.SMCACRE.GOV

This space for Clerk's use only

M-298311

FILED
SAN MATEO COUNTY
Aug 22 2024
MARK CHURCH, County Clerk

By _____ Deputy Clerk

ENDORSED
IN THE OFFICE OF THE
COUNTY CLERK RECORDER
SAN MATEO COUNTY CALIF

Expires: August 21, 2029

☑ Original ☐ New Filing (Change in Facts) ☐ Refile (No Change in Facts)

Previous #: _____ ☑ ID Checked ☐ Received by Mail

FILING FEE: $34.00 - *$5.00 per each additional Business Name or Registrant Owner*

FILE NUMBER:

FICTITIOUS BUSINESS NAME STATEMENT

* The following person(s) is (are) doing business as:
AMS BEKINS - BAY AREA MOVERS

** Street Address (No PO Box, Postal Facility or PMB)				Mailing Address If Different		
444 VALLEY DRIVE						
City	State	Zip Code	County	City	State	Zip Code
BRISBANE	CA	94005	SAN MATEO			

*** 1. REGISTRANT NAME & ADDRESS	*** 2. REGISTRANT NAME & ADDRESS
Name (Individual, Corp, LLC, General Partner, Trustee): AMS RELOCATION, INCORPORATED	Name (Individual, Corp, LLC, General Partner, Trustee):
Street Address (PO Box, Postal Facility or PMB Allowed) 444 VALLEY DRIVE	Street Address (PO Box, Postal Facility or PMB Allowed)
City, State & Zip Code BRISBANE, CA 94005	City, State & Zip Code
*** 3. REGISTRANT NAME & ADDRESS	*** 4. REGISTRANT NAME & ADDRESS
Name (Individual, Corp, LLC, General Partner, Trustee):	Name (Individual, Corp, LLC, General Partner, Trustee):
Street Address (PO Box, Postal Facility or PMB Allowed)	Street Address (PO Box, Postal Facility or PMB Allowed)
City, State & Zip Code	City, State & Zip Code

Note: If more than Four Registrants, attach additional Sheet

**** This business is conducted by: (*Check One*)

- ☐ Individual
- ☐ Married Couple
- ☐ Copartners
- ☐ Joint Venture
- ☐ General Partnership
- ☐ Limited Partnership
- ☐ Trust
- ☐ Limited Liability Partnership
- ☐ Limited Liability Company, State of Organization: _____
- ☒ Corporation, State of Incorporation: CA
- ☐ State or Local Registered Domestic Partners
- ☐ An Unincorporated Association other than a partnership

*****The registrant commenced to transact business under the fictitious business name or names listed above on: N/A

Enter N/A if you have not yet commenced to transact business. Note: Cannot be a future date. (Month/Day/Year or N/A)

Business & Professions Code 17930 Any person who executes, files or publishes any Fictitious Business Name Statement, knowing that such statement is false, in whole or part, is guilty of a misdemeanor and upon conviction thereof shall be fined not to exceed one thousand dollars ($1000).
This statement was filed with the San Mateo County Clerk on the date indicated by the FILED stamp in the upper right corner.
Signer acknowledges receipt of the Information & Instructions on the reverse of this form.

I declare that all information in this statement is true and correct. *(A registrant who declares as true information which he or she knows to be false is guilty of crime.)*

Signature of Registrant: _____

Print Name of Signer: MICHAEL FOSTER-PRESIDENT

NOTE: If Corporation, also print title of Officer. If LLC, also print title of Officer/Manager

NOTICE—IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

CERTIFICATION
I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

MARK CHURCH, SAN MATEO COUNTY ASSESSOR
CLERK-RECORDER & ELECTIONS

BY: _____ DEPUTY CLERK
Maria Gallardo

Newspaper Copy