



**REQUEST FOR CHANGE OF  
 REGISTERED COMPANY'S NAME  
 FEE \$25**

FOR BOARD USE ONLY	
Cashiering No.:	
Checked by:	Effective Date

<b>Present Name Style</b>	<b>Registration No.:</b>
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Address	City	State
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<b>New Name Style</b>
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Address	City	State	Zip
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**Application must be accompanied by:**

- \$25 Fee. Remit by money order, cashier's check or personal check payable to the Structural Pest Control Board. Do not send cash.
- Company registration and any branch office registration(s).
- Evidence that fictitious name has properly been recorded if new name style is a fictitious name.
- Bond and Insurance amended to reflect new name style.

I certify under penalty of perjury under the laws of the State of California that this change of name is not for the purpose of defrauding creditors, or any other person or person or for circumventing the provisions of the Business and Professions Code of California or any other law of the United States, State of California or any political subdivision thereof.

PRINT NAME	SIGNATURE	TITLE	DATE

A sole owner must sign this application.  
 A partnership application must be signed by each partner.  
 A corporation application must be signed by an officer of the corporation or a shareholder.  
**Each Qualifying Manager must sign this application.**