

**NOTICE OF BUSINESS CHANGE
SPECIAL TAXES AND FEES ACCOUNTS**

SPECIAL TAXES AND FEES ACCOUNT NUMBER	REGISTERED BUSINESS NAME
REGISTERED BUSINESS LOCATION <i>(street, city, state, zip code)</i>	

Please complete the applicable sections of this form and mail to: **California Department of Tax and Fee Administration, ATTN: Registration and Licensing, MIC:88, PO Box 942879, Sacramento, CA 94279-0088.** Use additional sheets if necessary. **PLEASE COMPLETE SECTION IV.**

SECTION I: BUSINESS SOLD/CLOSED

SPECIAL TAXES AND FEES ACCOUNT NUMBER	TITLE	DATE SOLD/CLOSED
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SECTION II: ADDRESS CHANGES

NEW BUSINESS LOCATION <i>(street, city, state, zip code)</i> <i>(do not use a PO Box)</i>		DATE MOVED
ADDED NEW SUBLOCATION <i>(street, city, state, zip code)</i>	OLD/CLOSED SUBLOCATION <i>(street, city, state, zip code)</i>	ADDED/SOLD/CLOSED DATE
DAYTIME PHONE NUMBER ()	FAX NUMBER ()	
NEW MAILING ADDRESS <i>(street, city, state, zip code)</i>		
OLD MAILING ADDRESS <i>(street, city, state, zip code)</i>		

SECTION III: OWNERSHIP/DBA CHANGES

NEW OWNER'S NAME		DAYTIME PHONE NUMBER ()
HAS BUSINESS NAME (DBA) CHANGED? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If yes, new business name or DBA)</i>		
CORPORATION NAME	CORPORATE ID NUMBER	STATE OF INCORPORATION
<input type="checkbox"/> Check here if partner or LLC member added		<input type="checkbox"/> Check here if partner or LLC member dropped
NAME	DATE ADDED	NAME
		DATE DROPPED

SECTION IV: SIGNATURE

SIGNATURE <i>(owner, corporate officer, member, partner)</i>	TITLE	DATE
PRINT NAME	BUSINESS EMAIL ADDRESS	
CURRENT MAILING ADDRESS <i>(street, city, state, zip code)</i>	CURRENT PHONE NUMBER ()	

We recommend you retain proof of mailing this form. We will contact you if we need more information. If you have general questions, please contact our Customer Service Center at 1-800-400-7115 (TTY: 711). Customer service representatives are available weekdays from 8:00 a.m. to 5:00 p.m. (Pacific time), except state holidays. You may also visit our website at www.cdtfa.ca.gov.

ADDITIONAL INFORMATION

Please provide additional information for updating your account if:

- You added or dropped more than one partner (or LLC member), provide additional names, dates, and phone numbers.
- You added or deleted more than one sublocation, provide the location address (street, city, state, zip) and the date added, sold, or closed.
- You closed your business, please provide your current daytime phone number and mailing address.
- Your changes apply to more than one Special Taxes and Fees Account, please enter the account number of the additional account(s) to be changed below.
- Each Special Taxes and Fees account(s) is owned by a different entity. Please file a separate CDTFA-345-SP for each entity.

LIST ADDITIONAL SPECIAL TAXES AND FEES ACCOUNTS TO BE CHANGED