NAME AND ADDRESS OF A	TTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NUMB	ER	FOR COURT USE ONLY
				_
TELEPHONE NO.:	FAX NO. (Op	otional):		
E-MAIL ADDRESS (Optional) ATTORNEY FOR (Name):	:			-
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES COURTHOUSE ADDRESS:				-
PLAINTIFF:				-
DEFENDANT:				
AMENDMENT TO COMPLAINT (Fictitious/Incorrect Name)				CASE NUMBER:
☐ FICTITIOUS NAME	(No Order required)	•		
Upon the filing of the co	emplaint, the plaintiff, being ignorant caint to be:	of the true name	of the defendant	and having designated the
FICTITIOUS NAME				
and having discovered	the true name of the defendant to be):		
TRUE NAME				
amends the complaint b	by substituting the true name for the f	ictitious name wh	nerever it appea	rs in the complaint.
DATE TYPE OR PRINT NAME SIGNATURE OR A			SIGNATURE OR ATT	ORNEY
☐ INCORRECT NAME	(Order required)			
The plaintiff, having des	signated a defendant in the complaint	by the incorrect	name of:	
INCORRECT NAME				
	the true name of the defendant to be			
TRUE NAME				
amends the complaint b	by substituting the true name for the i	ncorrect name w	herever it appea	irs in the complaint.
DATE	TYPE OF PRINT NAME		SIGNATURE OF ATT	DRNEY
		ORDER		
THE COURT ORDERS the	e amendment approved and filed.			
Dated			Judici	al Officer

AMENDMENT TO COMPLAINT (Fictitious / Incorrect Name)