

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) Anat Resnik 192047 LAW OFFICES OF ANAT RESNIK 15760 Ventura Boulevard, Suite 1160 Encino, California 91436 TELEPHONE NO: (818) 990-1405 FAX NO (Optional) (818) 475-5320 E-MAIL ADDRESS (Optional) anat@anatresnik.com ATTORNEY FOR (Name) Respondent	FOR COURT USE ONLY FILED Superior Court of California County of Los Angeles JUL 20 2015 Sherri R. Carter, Executive Officer/Clerk By <i>Armida Gutierrez</i> , Deputy Armida Gutierrez
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS same CITY AND ZIP CODE Los Angeles, California 90012 BRANCH NAME: Central	
CASE NAME: In re Marriage of Randoy	
SUBSTITUTION OF ATTORNEY - CIVIL (Without Court Order)	CASE NUMBER: BD621137 <i>D.22</i>

THE COURT AND ALL PARTIES ARE NOTIFIED THAT (name): Marieke Randoy makes the following substitution:

- Former legal representative Party represented self Attorney (name):
- New legal representative Party is representing self* Attorney
 - Name: Anat Resnik
 - State Bar No. (if applicable): 192047
 - Address (number, street, city, ZIP, and law firm name, if applicable):
 Law Offices of Anat Resnik
 15760 Ventura Boulevard, Suite 1160
 Encino, CA 91436
 - Telephone No. (include area code): 818-990-1405
- The party making this substitution is a plaintiff defendant petitioner respondent other (specify):

***NOTICE TO PARTIES APPLYING TO REPRESENT THEMSELVES**

- Guardian
- Personal Representative
- Guardian ad litem
- Conservator
- Probate fiduciary
- Unincorporated association
- Trustee
- Corporation

If you are applying as one of the parties on this list, you may NOT act as your own attorney in most cases. Use this form to substitute one attorney for another attorney. SEEK LEGAL ADVICE BEFORE APPLYING TO REPRESENT YOURSELF.

NOTICE TO PARTIES WITHOUT ATTORNEYS
 A party representing himself or herself may wish to seek legal assistance. Failure to take timely and appropriate action in this case may result in serious legal consequences.

4. I consent to this substitution.
Date: 7/16/2015

Marieke Randoy
(TYPE OR PRINT NAME)

Marieke Randoy
(SIGNATURE OF PARTY)

5. I consent to this substitution.
Date: 7/16/2015

Marieke Randoy
(TYPE OR PRINT NAME)

Marieke Randoy
(SIGNATURE OF FORMER ATTORNEY)

6. I consent to this substitution.
Date: 7/16/2015

Anat Resnik
(TYPE OR PRINT NAME)

Anat Resnik
(SIGNATURE OF NEW ATTORNEY)

(See reverse for proof of service by mail)

CASE NAME: Marriage of Randoy	CASE NUMBER: BD621137
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**PROOF OF SERVICE BY MAIL
Substitution of Attorney - Civil**

Instructions: After having all parties served by mail with the Substitution of Attorney-Civil, have the person who mailed the document complete this Proof of Service by Mail. An unsigned copy of the Proof of Service by Mail should be completed and served with the document. Give the Substitution of Attorney-Civil and the completed Proof of Service by Mail to the clerk for filing. If you are representing yourself, someone else must mail these papers and sign the Proof of Service by Mail.


1. I am over the age of 18 and **not a party to this cause**. I am a resident of or employed in the county where the mailing occurred. My residence or business address is (*specify*): 15760 Ventura Boulevard, Suite 1160 Encino, CA 91436
2. I served the Substitution of Attorney-Civil by enclosing a true copy in a sealed envelope addressed to each person whose name and address is shown below and depositing the envelope in the United States mail with the postage fully prepaid.

(1) Date of mailing: July 21, 2015 (2) Place of mailing (*city and state*): Encino, CA

3. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: July 21, 2015

Theresa Pavon _____
(TYPE OR PRINT NAME)

 _____
(SIGNATURE)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

4. a. Name of person served: Nicholas Salick, Esq.
 b. Address (*number, street, city, and ZIP*): Salick Family Law Group, APLC
 9595 Wilshire Blvd., Suite 900
 Beverly Hills, CA 90212
- c. Name of person served:
 d. Address (*number, street, city, and ZIP*):
- e. Name of person served:
 f. Address (*number, street, city, and ZIP*):
- g. Name of person served:
 h. Address (*number, street, city, and ZIP*):
- i. Name of person served:
 j. Address (*number, street, city, and ZIP*):

List of names and addresses continued in attachment.