

ORIGINAL CIV-110
FOR COURT USE ONLY

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) SBN 55365
 Barry G. West
 Gaims Weil West LLP, 1875 Century Park East, Ste. 1200, L.A. CA 90067
 TELEPHONE NO.: 310 407-4500 FAX NO. (Optional): 310 277-2133
 E-MAIL ADDRESS (Optional): bgwest@gwwe.com
 ATTORNEY FOR (Name): Plaintiff Alima Beg

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles
 STREET ADDRESS: 111 North Hill Street
 MAILING ADDRESS: as above
 CITY AND ZIP CODE: Los Angeles, California 90012
 BRANCH NAME: Central

PLAINTIFF/PETITIONER: Alima Beg
 DEFENDANT/RESPONDENT: John Babikian, Middlebay Trade Ltd., Oriwa Villas Ltd.

REQUEST FOR DISMISSAL

CASE NUMBER: BC 521715

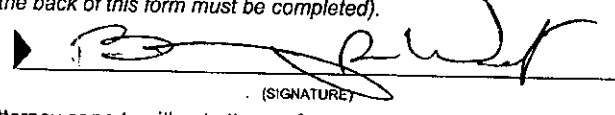
A conformed copy will not be returned by the clerk unless a method of return is provided with the document.
 This form may not be used for dismissal of a derivative action or a class action or of any party or cause of action in a class action. (Cal. Rules of Court, rules 3.760 and 3.770.)

REC'D
 JUL 14 2014
 FILING WINDOW
 FILED
 Superior Court of California
 County of Los Angeles
 JUL 14 2014
 Sherri R. Carter, Executive Officer/Clerk
 R. Lomelli Deputy

1. TO THE CLERK: Please dismiss this action as follows:
- a. (1) With prejudice (2) Without prejudice
 - b. (1) Complaint (2) Petition
 - (3) Cross-complaint filed by (name): _____ on (date): _____
 - (4) Cross-complaint filed by (name): _____ on (date): _____
 - (5) Entire action of all parties and all causes of action
 - (6) Other (specify):*

2. (Complete in all cases except family law cases.)
 The court did did not waive court fees and costs for a party in this case. (This information may be obtained from the clerk. If court fees and costs were waived, the declaration on the back of this form must be completed.)
 Date: July 9, 2014

BARRY G. WEST
 (TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

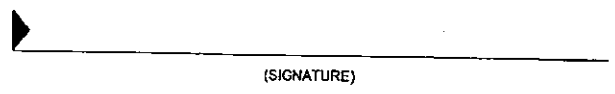

 (SIGNATURE)

*If dismissal requested is of specified parties only of specified causes of action only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.

Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross-Complainant

3. TO THE CLERK: Consent to the above dismissal is hereby given.**
 Date: _____

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)


 (SIGNATURE)

** If a cross-complaint - or Response (Family Law) seeking affirmative relief - is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (i) or (j).

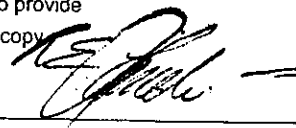
Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross-Complainant

(To be completed by clerk)
 4. Dismissal entered as requested on (date): 7-14-14

5. Dismissal entered on (date): _____ as to only (name): _____

6. Dismissal not entered as requested for the following reasons (specify): _____

7. a. Attorney or party without attorney notified on (date): _____
 b. Attorney or party without attorney not notified. Filing party failed to provide
 a copy to be conformed means to return conformed copy

Date: 7-14-14
 SHERRI R. CARTER, Clerk by  Deputy

BY FAX

07/23/14