

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <b>Natalia Foley Esq (SBN 295923)</b> Law Offices of Natalia Foley 751 S Weir Canyon Rd Ste 157-455 Anaheim CA 92808 TELEPHONE NO.: 3107078098 FAX NO. (Optional): 3106269632 E-MAIL ADDRESS (Optional): nfoleylaw@gmail.com ATTORNEY FOR (Name): Ekaterina Korotun	FOR COURT USE ONLY           CASE NUMBER: <b>22STCV21852</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES</b> STREET ADDRESS: 111 N Hill St MAILING ADDRESS: 111 N Hill St CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: STANLEY MOSK COURTHOUSE	
CASE NAME: <b>DYLAN YEISER-FODNESS VS MASTER DOG TRAINING ET AL</b>	
<b>SUBSTITUTION OF ATTORNEY—CIVIL (Without Court Order)</b>	

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

1. **Former legal representative**  Party represented self  Attorney (name): **NATALIA FOLEY**
2. **New legal representative**  Party is representing self\*  Attorney
  - a. Name: **Ekaterina Korotun** b. State Bar No. (if applicable):
  - c. Address (number, street, city, ZIP and law firm name, if applicable):  

**19401 PARTHENIA ST APT 4082 NORTHRIDGE, CA 91324**  
**949 400 6567**
  - d. Telephone No. (include area code):
3. The party making this substitution is a  plaintiff  defendant  petitioner  respondent  other (specify):

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


<ul style="list-style-type: none"> <li>• Guardian</li> <li>• Conservator</li> <li>• Trustee</li> </ul>	<ul style="list-style-type: none"> <li>• Personal Representative</li> <li>• Probate fiduciary</li> <li>• Corporation</li> </ul>	<ul style="list-style-type: none"> <li>• Guardian ad litem</li> <li>• Unincorporated association</li> </ul>
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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.

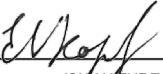
**NOTICE TO PARTIES WITHOUT ATTORNEYS**

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: 08/08/2023  
 Ekaterina Korotun \_\_\_\_\_  

(TYPE OR PRINT NAME)
 (SIGNATURE OF PARTY)
5.  I consent to this substitution.  
 Date: 08/08/2023  
 Natalia Foley, Esq (SBN 295923) \_\_\_\_\_  

(TYPE OR PRINT NAME)
 (SIGNATURE OF FORMER ATTORNEY)
6.  I consent to this substitution.  
 Date: 08/08/2023  
 Ekaterina Korotun \_\_\_\_\_  

(TYPE OR PRINT NAME)
 (SIGNATURE OF NEW ATTORNEY)

(See reverse for proof of service by mail)

CASE NAME: — DYLAN YEISER-FODNESS VS MASTER DOG TRAINING ET AL	CASE NUMBER: 22STCV21852
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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*):

751 S Weir Canyon Rd Ste 157-455 Anaheim CA 92808

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: 08/08/2023

(2) Place of mailing (*city and state*): Los Angeles CA

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

Date: 08/08/2023

\_\_\_\_\_  
Irina Palees

(TYPE OR PRINT NAME)

\_\_\_\_\_  


(SIGNATURE)

**NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED**

4. a. Name of person served: Young W Ryu, Esq

b. Address (*number, street, city, and ZIP*):

LOYR, APC

1055 West 7th Street, Suite 2290 Los Angeles CA 90017

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.