ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:
NAME: Kane Moon (SBN 249834); Sandy Pham (SBN 352753)
FIRM NAME: MOON LAW GROUP, PC
STREET ADDRESS: 725 S. Figueroa St., 31st Floor
CITY: Los Angeles STATE: CA ZIP CODE: 90017
TELEPHONE NO.: (213) 232-3128 FAX NO.: (213) 232-3125
EMAIL ADDRESS: kmoon@moonlawgroup.com; spham@moonlawgroup.com
ATTORNEY FOR (name): Plaintiff, Kelley Ha

FOR COURT USE ONLY

FILED
Superior Court of California
County of Los Angeles
10/08/2025
David W. Slayton, Executive Officer / Clerk of Court
By: S. Sato Deputy

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES
STREET ADDRESS: 111 North Hill Street
MAILING ADDRESS:
CITY AND ZIP CODE: Los Angeles, CA 90012
BRANCH NAME: Stanley Mosk Courthouse

PLAINTIFF/PETITIONER: KELLEY HA
DEFENDANT/RESPONDENT: KHANNA VISION INSTITUTE

REQUEST FOR DISMISSAL

CASE NUMBER: 25STCV20037

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.)

1. TO THE CLERK: Please **dismiss** this action as follows:
   a. (1) [x] With prejudice (2) [ ] Without prejudice (3) [ ] Without prejudice and with the court retaining jurisdiction (Code Civ. Proc., § 664.6)
   b. (1) [ ] Complaint (2) [ ] Petition
      (3) [ ] Cross-complaint filed on *(date):* by *(name):*
      (4) [ ] Cross-complaint filed on *(date):* by *(name):*
      (5) [x] 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 [x] 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: 10/08/2025
Kane Moon
(TYPE OR PRINT NAME OF [x] ATTORNEY [ ] PARTY WITHOUT ATTORNEY)

(SIGNATURE)
Attorney or party without attorney for
[x] Plaintiff/Petitioner [ ] Defendant/Respondent
[ ] Cross-Complainant

* 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

3. TO THE CLERK: Consent to the above dismissal is hereby given.†

Date: 10/08/2025
Kane Moon
(TYPE OR PRINT NAME OF [x] ATTORNEY [ ] PARTY WITHOUT ATTORNEY)

(SIGNATURE)
Attorney or party without attorney for
[x] Plaintiff/Petitioner [ ] Defendant/Respondent
[ ] Cross-Complainant

† If item 1a(3) is checked, all parties must sign.
If a cross-complaint—or *Response—Marriage/Domestic Partnership* (form FL-120) 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).

[ ] Check here and use form MC-025 or a separate page for additional signatures. Include date, printed name, and party information.

4. [x] Dismissal entered as requested on *(date):* 10/8/2025
5. [ ] Dismissal entered on *(date):* as to only *(name):*
6. [ ] Dismissal **not entered** as requested for the following reasons *(specify):*

7. a. [x] Attorney or party without attorney notified on *(date):* 10/9/2025
   b. [ ] Attorney or party without attorney not notified. Filing party failed to provide
      [ ] a copy to be conformed [ ] means to return conformed copy

David W. Slayton, Executive Officer / Clerk of Court

Date: 10/9/2025 Clerk, by S. Sato, Deputy

Form Adopted for Mandatory Use
Judicial Council of California
CIV-110 [Rev. January 1, 2025]

Code of Civil Procedure, § 581 et seq.;
Government Code, § 68637(c); Cal. Rules of Court, rule 3.1390
www.courts.ca.gov

PLAINTIFF/PETITIONER: KELLEY HA DEFENDANT/RESPONDENT: KHANNA VISION INSTITUTE	CASE NUMBER: 25STCV20037

COURT'S RECOVERY OF WAIVED COURT FEES AND COSTS

If a party whose court fees and costs were initially waived has recovered or will recover $10,000 or more in value by way of settlement, compromise, arbitration award, mediation settlement, or other means, the court has a statutory lien on that recovery. The court may refuse to dismiss the case until the lien is satisfied. (Gov. Code, § 68637.)

Declaration Concerning Waived Court Fees

1. The court waived court fees and costs in this action for *(name):*
2. The person named in item 1 is *(check one below)*
   a. ☐ not recovering anything of value by this action.
   b. ☐ recovering less than $10,000 in value by this action.
   c. ☐ recovering $10,000 or more in value by this action. *(If item 2c is checked, item 3 must be completed.)*
3. All court fees and court costs that were waived in this action have been paid to the court *(check one):* ☐ Yes ☐ No

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

Date:

(TYPE OR PRINT NAME OF ☐ ATTORNEY ☐ PARTY MAKING DECLARATION)

(SIGNATURE)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form Save this form Clear this form

PROOF OF SERVICE

STATE OF CALIFORNIA)
)
COUNTY OF LOS ANGELES)

I am employed in the county of Los Angeles, State of California. I am over the age of 18 and not a party to the within action; my business address is 725 S Figueroa St., 31st Floor, Los Angeles, California 90017. On **October 8, 2025**, I served the foregoing document described as:

REQUEST FOR DISMISSAL

X by placing ___ the original X a true copy thereof enclosed in sealed envelope(s) addressed as follows :

Enoch Wang, Esq.
FIFE LAW, LLP
300 Montgomery St Ste 631
San Francisco, CA 94104-1908
E-mail: enochwang@fifelawllp.com
Telephone: (415) 837-3101
Facsimile: 415-837-3111

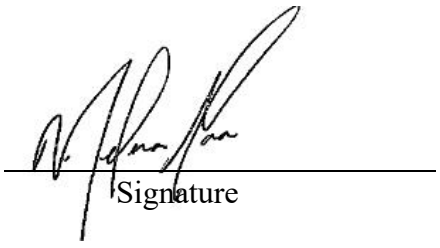
Attorneys for Defandant Khanna Vision Institute

[✓] **BY E-MAIL:** I hereby certify that this document was served from Los Angeles, California, by e-mail delivery on the parties listed herein at their most recent known e-mail address or e-mail of record in this action.

X (State) I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

Executed on **October 8, 2025**, at Los Angeles, California.

Helena Maa
Name


Signature