ATTORNEY OR PARTY WITHOUT ATTORNEY
NAME: Mac E. Nehoray
FIRM NAME: Southern California Attorneys, APC.
STREET ADDRESS: 24007 Ventura Blvd. Suite 200
CITY: Calabasas
STATE BAR NUMBER: 147168
STATE: CA
ZIP CODE: 91302
TELEPHONE NO.: 818-222-2227
FAX NO.:
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ATTORNEY FOR *(name)*: Plaintiff- Robert Calleors

FOR COURT USE ONLY

ELECTRONICALLY FILED
Merced Superior Court
2/3/2026 11:54 AM
Amanda Toste
Clerk of the Superior Court
By: Veronica Leon, Deputy

SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED
STREET ADDRESS: 1159 G. St.
MAILING ADDRESS:
CITY AND ZIP CODE: Los Banos, 93635
BRANCH NAME:

PLAINTIFF/PETITIONER: Robert Calleros
DEFENDANT/RESPONDENT: The Morning Star Company

REQUEST FOR DISMISSAL

CASE NUMBER: 24CV-01990

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) ☐ 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) ☒ 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: February 3, 2026

Mac E. Nehoray
(TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

Mac E. Nehoray
(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 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).

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

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

4. ☒ Dismissal entered as requested on *(date):* 2/3/2026 11:54 AM
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: 2/3/2026 11:54 AM

Clerk, by Amanda Toste Veronica Leon, Deputy

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

REQUEST FOR DISMISSAL

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

PLAINTIFF/PETITIONER: Robert Calleros DEFENDANT/RESPONDENT: The Morning Star Company	CASE NUMBER: 24CV-01990

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: February 3, 2026

Mac E. Nehoray
(TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY MAKING DECLARATION)

Mac E. Nehoray
(SIGNATURE)

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 eighteen (18) years and not a party to the within action. My business address is 24007 Ventura Blvd Suite 200, Calabasas, CA 91302.

On February 3, 2026, I served a true and correct copy of the foregoing document(s)described as:

REQUEST FOR DISMISSAL

on the following interested party or parties in this action:

Meagan D. Bainbridge, Esq. Attorney for Defendant
mbainbridge@weintraub.com
Attorneys for Defendant

The service of said document(s) was completed in the following manner:

( ) **BY MAIL** - I placed a true copy of the above-described document(s) in a sealed envelope, addressed to the above identified party or parties, with postage affixed thereon, fully prepaid, in the mail at Calabasas, California. I am readily familiar with the firm's practice of collection and processing envelopes for mailing and so deposited the envelope for mailing. Under that practice, the envelope would be deposited with the U.S. Postal Service on the same day with postage thereon fully prepaid at Calabasas, California in the ordinary course of business.

( ) **BY FAX** - I personally faxed the above-described document(s) to the office(s) of the above identified person or persons. The transmission was conducted between the hours of 9:00 a.m. and 5:00 p.m. on the date noted above and the transmission was reported as being complete and without error.

( ) **BY ELECTRONIC MAIL** - I personally transmitted a PDF version of the above-described document(s) to the above identified person or persons by electronic mail. The electronic mailing was transmitted to each recipient at the e-mail address for that person which is set forth above.

(**X**) **BY ELECTRONIC MAIL ONLY** - I personally transmitted a PDF version of the above-described document(s) to the above identified person or persons by electronic mail. The electronic mailing was transmitted to each recipient at the e-mail address for that person which is set forth above. This method of service is necessitated during the declared National and State emergencies due to COVID-19 pandemic, including without limitation the stay-at-home Executive Order issued by the Governor of the State of California, because the staff of this office will be working remotely and are currently unable to process physical mail as usual. The sender will provide a physical copy of the document(s), upon request only when the office staff return to the office once

the National and State emergency orders have been lifted.

( ) **BY OVERNIGHT DELIVERY** - I placed a true copy of the document(s) in a sealed envelope, addressed to the above identified party or parties, and personally arranged for the delivery of the same through a professional overnight delivery service (with guaranteed next business day delivery). All fees relating to this delivery were prepaid.

I DECLARE, under penalty of perjury, that the foregoing is true and correct, and that this Declaration is EXECUTED on February 3, 2026, at Calabasas, California.

Soraya Hawatmeh

Soraya Hawatmeh, Declarant