

Certificate of Assumed Business Name

\_\_\_\_\_  
(Name of Business)  
\_\_\_\_\_  
(Type of Business)  
\_\_\_\_\_  
(Place of Business)

Name(s) Of Owner(s)      Address(s) Of Owner(s)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Owner or Member

State of \_\_\_\_\_)

County of \_\_\_\_\_)

SS

On this \_\_\_\_\_ day of \_\_\_\_\_, before me personally appeared \_\_\_\_\_ to me known to be the person(s)

described in and who executed the forgoing instrument and acknowledged that they executed the same as their free act and deed.

\_\_\_\_\_

(Notary Signature)

Notary Seal

\_\_\_\_\_  
(Notary Printed Name)

My Commission expires \_\_\_\_\_

This Instrument Prepared by \_\_\_\_\_

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. \_\_\_\_\_