CORTLAND COUNTY CLERK
46 GREENBUSH ST, SUITE 105
CORTLAND NY 13045

ELIZABETH LARKIN
COUNTY CLERK
PHONE 607-753-5021
>>

BUSINESS CERTIFICATE

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I HEREBY CERTIFY THAT:

My Name is____

My Address is:____
(Street Address) (City) (State) (Zip)

I am eighteen years of age or older (if less than eighteen, my age is_______________________)

I am conducting or transacting business under the name or designation of:

____
(Business Name)

____
(Business Street Address) (City) (State) (Zip) (County)

OPTIONAL
I FURTHER CERTIFY THAT:

I am the successor in interest to the following person, who formerly used this name or names to conduct or transact business (person's name)_____________________________________

Signature____

Date________________________

STATE OF NEW YORK, COUNTY OF CORTLAND

On this_____________day of _________________, 20____, before me, personally appeared

____,
personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

____
Notary Public