

Business Certificate

I HEREBY CERTIFY that I am conducting or transacting business under the name or designation

of _____

at _____

City or Town of _____ County of _____ State of New York.

My full name is _____

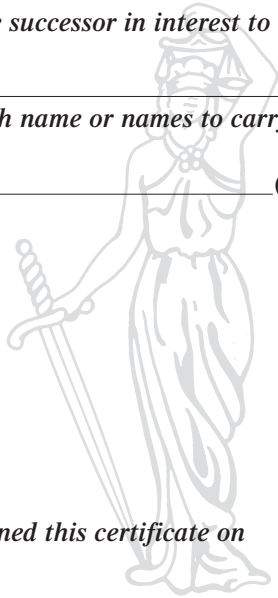
Print or type name. If under 21 years of age, state "I am years of age".

and I reside at _____

I FURTHER CERTIFY that I am the successor in interest to _____

the person or persons heretofore using such name or names to carry on or conduct or transact business.

Type of business _____ (see next page)



IN WITNESS WHEREOF, I have signed this certificate on

20

STATE OF NEW YORK, COUNTY OF

ss.:

On _____ before me, the undersigned, personally appeared _____ personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

(signature and office of person taking acknowledgment)

Notary Stamp



X 201—Certificate of Conducting Business under an Assumed Name for Individual, 4-10

**State of New York
County of**

ss.:

**State of
County of**

ss.:

On
personally appeared

before me, the undersigned,

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

(signature and office of individual taking acknowledgment)

On
personally appeared

before me, the undersigned,

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

(signature and office of individual taking acknowledgment)

INDEX No.

Certificate of

*CONDUCTING BUSINESS UNDER
THE NAME OF*

GBL §130.4. A certified copy of the original certificate, or if an amended certificate has been filed, then of the most recent amended certificate filed shall be conspicuously displayed on the premises at each place in which the business for which the same was filed is conducted.

Some counties request the type of business.

Consultant Services	Medical—Home Care Services
Educational Services	Professional—Technical Services
Entertainment—Recreation	Real Estate Services
Finance—Insurance Services	Retail Trade
Home Improvement Services	Wholesale Trade
Other (state type)	