

BUSINESS CERTIFICATE

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

Business Name _____

Business Address _____ **WARREN**
(Street, City, State & Zip) (County)

My Name is _____

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.

IN WITNESS WHEREOF, I have signed this certificate on _____.

*** If under 18 state age

Signature

STATE OF NEW YORK
COUNTY OF

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 names(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 signatures(s) on the instrument, the individuals(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public

BUSINESS CERTIFICATE FOR PARTNERS

The undersigned do hereby certify that they are conducting or transacting business as members of a partnership under the name or designation of:

Business Name _____

Business Address _____
(Street Address) (City) (State) (Zip Code) (County)

and do *further certify* that the full names of all the persons conducting or transacting such partnership including the full names of all the partners with residence address of each such person, and the age of any who may be infants, are as follows:

<u>Name</u> (specify age if under 18)	<u>Residence</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WE DO FURTHER CERTIFY that we are the successors in interest to: _____
the person or persons heretofore using such name or names to carry on or conduct or transact business.

IN WITNESS WHEREOF, we have signed this certificate on _____.

STATE OF NEW YORK
COUNTY OF WARREN

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 names(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 signatures(s) on the instrument, the individuals(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public

AMENDED BUSINESS CERTIFICATE

The undersigned hereby certify that a certificate of doing business under the assumed name of:

Business Name _____

Business Address _____
(Street Address) (City) (State) (Zip Code) (County)

was filed in the Warren County Clerk's Office, State of New York on _____ under Instrument Number _____ and last amended certificate was filed on _____.

It is hereby certified that this amended certificate is made for the purpose of more accurately setting forth the facts recited in the original certificate or the last amended certificate and to set forth the following changes in such facts

IN WITNESS WHEREOF, I have signed this certificate on _____.

Signature

STATE OF NEW YORK
COUNTY OF WARREN

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 names(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 signatures(s) on the instrument, the individuals(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public

CERTIFICATE OF DISCONTINUANCE OF BUSINESS

I *HEREBY CERTIFY* that I have conducted or transacted business under the name of:

Business Name _____

Business Address _____

The certificate was filed in the Warren County Clerk's Office, State of New York on _____
under Instrument Number _____ and last amended certificate was filed on _____.

and I *hereby further certify* that the filing of a certificate in said County is no longer required for the reason that the
said business was discontinued on _____.

or conditions under which the business is conducted have changed so that the filing of a certificate in said County is
no longer required for the following reason:

I therefore desire to file this certificate of discontinuance.

IN WITNESS WHEREOF, I have signed this certificate on _____.

Signature

STATE OF NEW YORK
COUNTY OF WARREN

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 names(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 signatures(s) on the instrument, the individuals(s), or the person
upon behalf of which the individual(s) acted, executed the instrument.

Notary Public