

**BUSINESS REGISTRATION CERTIFICATE  
PERSON CONDUCTING BUSINESS UNDER ASSUMED NAME  
OR PARTNERSHIP**

D.B.A. File No. \_\_\_\_\_  
 Certificate Exp. \_\_\_\_\_  
 Certificate Filed \_\_\_\_\_  
 Dissolved \_\_\_\_\_

County of Montmorency, Office of County Clerk

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A. of Michigan for the year 1907, as amended, that the following person (or persons) now owns, carries on, conducts or transacts, or intends to own, carry on, conduct, or transact, a business, or maintain an office or place of business, in the County of Montmorency, State of Michigan, under the name, designation or style set forth below:

**FILING FEE \$10.00**

1.	Name of Business _____
2.	Address of Business _____
	Mailing Address, if different [ ] City [ ] Township _____

**INDIVIDUAL**

3. NAME OF PERSON OR PERSONS owning, conducting, transacting or composing the above business, and the home post office address of each:

	NAME OF PERSON	RESIDENCE ADDRESS (Street, City, State)
(Print)	_____	_____
(Print)	_____	_____
(Print)	_____	_____
(Print)	_____	_____

**GENERAL**

4. PARTNERSHIP CERTIFICATE: The Undersigned hereby certify under the provisions of P.A. No. 164, P.A. of Michigan for the year 1913, as amended, that:  
 (a) The Business mentioned herein (Insert "IS" or "IS NOT") \_\_\_\_\_ a Partnership.  
 (If the Business IS a Partnership, fill in the blank line under (b) below.)  
 (b) Length of time General Partnership is to continue. (Insert either the Term agreed on by the Partners, or the statement "Not Limited".)

5. SIGNATURES OF ALL PERSONS LISTED ABOVE  
 Acknowledged before a Notary Public

(Signature) \_\_\_\_\_  
 (Signature) \_\_\_\_\_  
 (Signature) \_\_\_\_\_  
 (Signature) \_\_\_\_\_

STATE OF MICHIGAN  
 COUNTY OF MONTMORENCY

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D., \_\_\_\_\_  
 by all the persons listed above.

(Signature) \_\_\_\_\_  
 (Print) \_\_\_\_\_  
 Notary Public, Montmorency County, Michigan

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

Form below for use of County Clerk

STATE OF MICHIGAN COUNTY OF MONTMORENCY

I, \_\_\_\_\_, Clerk of the County of Montmorency and the Circuit Court thereof, do hereby certify that I have compared the foregoing copy of Business Registration Certificate with the original of record in my office, and that the same is a correct transcript therefrom, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of Said Circuit Court, at the courthouse in Atlanta, Michigan, this \_\_\_\_\_ day of \_\_\_\_\_ A.D., \_\_\_\_\_.

\_\_\_\_\_ Montmorency County Clerk By \_\_\_\_\_ County Clerk/Deputy County Clerk