

MENARD COUNTY CLERK & RECORDER

Martha "Marty" Gum 102 S. 7th Street Petersburg, IL 62675

Supplementary Certificate of Change of Assumed Name

(Filing fee of \$5.00)

On the _____ day of _____, 20____ an original Assumed Business Name Certificate was filed in the Office of the Menard County Clerk under the name _____

On this _____ day of _____, 20____the following person(s) wish(es) to have the following change(s) made to the above Assumed Name Certificate by filing this Supplementary Certificate with the Office of the County Clerk.

- Business Address Change
- Owner(s) Address Change
- Owner Legal Name Change

ress	(Publication NOT Required)	Previous Address of Business			
Business Address Change		City	State	Zip	
		New Business Address/or Additional Address			
		City	State	Zip	
ŝ	NOT	Owner Name	Phone Number		
		Previous Address			
Address	l no	City	State	Zip	
	licati	New Address Owner Name			
Owner	(Publication] Required)	City	State	Zip	
Owner Legal Name Change	(Publicatio n NOT Required)	Please print the full name of the person meeting legal requirements for a name change.			
		Previous Name			
		New Name			
STATE OF ILLINOIS)					

COUNTY OF MENARD

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This is to certify that the undersigned, upon oath, deposes and says that the foregoing is a true and correct report of the real full name(s) of the person(s) owning the Assumed Business Name listed above, and wishes to cancel in whole or in part of the above named certificate.

(Signature)	(Date)	(Signature)	(Date)
(Signature)	(Date)	(Signature)	(Date)
The foregoing instrument wa	as subscribed and sworn to before me this	s day of	
(SEAL)		(Signature of Notary	Public)
(For office use only) Certific	cate # D	river's License/ID	