

OTTAWA COUNTY
CERTIFIED BUSINESS REGISTRATION

Certificate Expiration Date

DBA File Number

Certificate File Date

Dissolved

Original

Daniel C. Krueger
County Clerk



Sherri A. Sayles
Chief Deputy Clerk

Renewal

Name of Business: _____

Address of Business: _____ Township/City: _____

Mailing Address if different: _____

Email Address: _____ Phone: _____

THE UNDERSIGNED hereby certifies, under the provisions of P.A. 101 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 Ottawa, State of Michigan, under the name, designated or style set forth below:

ASSUMED NAME: OR CO-PARTNERSHIP:

PARTNERSHIP CERTIFICATE: The Undersigned hereby certify under the provisions of P.A. 164 of Michigan for the year 1913, as amended, that:

- (a) The Business mentioned herein (Insert "IS" or "IS NOT") _____ a Partnership.
- (b) Length of time General Partnership is to continue (insert either the Term agreed on by the Partners or the statement "not limited") _____

Name of Person or Persons, owning, conducting, transacting, or composing the above business, and the mailing address of each:

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

SIGNATURES OF ALL PERSONS LISTED ABOVE

Acknowledged before a Notary Public

(Signature) _____

(Signature) _____

(Signature) _____

Subscribed and sworn to before me this _____ day of _____ A.D. 20____, by all persons listed above.

State of Michigan (Signature) _____

County of _____ (Print) _____

Notary Public, _____ County

My Commission expires: _____

Acting in the County of: _____

State of Michigan, County of Ottawa

I, DANIEL C. KRUEGER, Clerk of the County of Ottawa and of the Circuit Court thereof, do hereby certify that I have compared the forgoing copy of Business Registration Certificate with the original on record in my office, and that 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 City of Grand Haven, this _____ day of _____ A.D. 20____.

Daniel C. Krueger
County Clerk

Deputy Clerk