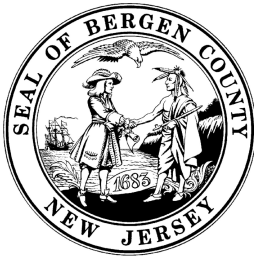


CHANGE OF ADDRESS # _____



CERTIFICATE OF TRADE NAME

Please Print or Type Clearly

BERGEN COUNTY CLERK

JOHN S. HOGAN, COUNTY CLERK

One Bergen County Plaza, Room 120

Hackensack, NJ 07601 Phone # 201-336-7006

Website: www.bergencountyclerk.org

THE UNDERSIGNED HEREBY CERTIFIES THE FOLLOWING:

Trade Name: _____

Business Address: _____

Town: _____ **Zip Code:** _____

Description of Business: _____

Business Phone: _____

Email Address: _____

OWNER(S) INFORMATION

(Do Not Sign Or Take The Oath Until in the Presence of a Notary Public)

Owner #1 Name: _____

Residence: _____

City/State/Zip: _____

Home Phone #: _____ **Cell #:** _____

Signature: _____

Owner #2 Name: _____

Residence: _____

City/State/Zip: _____

Home Phone #: _____ **Cell #:** _____

Signature: _____

Owner #3 Name: _____

Residence: _____

City/State/Zip: _____

Home Phone #: _____ **Cell #:** _____

Signature: _____

TO BE COMPLETED ONLY IF ANY OF THE OWNER(S) LIVE OUT OF STATE:

We do hereby appoint the Clerk of Bergen County, in the State of New Jersey, and his/her successors in office, our attorney in fact, upon whom may be served all process affecting the aforesaid business and trade name . And we do further agree that any process against the aforesaid Clerk of Bergen County be served, shall be of the same effect as if duly served upon the non-resident owner(s)/partner(s).

**STATE OF NEW JERSEY
COUNTY OF BERGEN**

The undersigned being duly sworn, say that all of the above person(s) named in the foregoing certificate swore before me that the statements contained therein are true, accurate and complete. Subscribed and sworn to before me this _____ day of _____.

Notary Public

N.J.S.A. 56:1-1

Notice: This form is provided as a convenience to the customers of the Bergen County Clerk. It does not imply legal advice as to the form or its content. The filing of this Trade Name Certificate does not preclude the use of this name by an incorporated entity.