

Form #C-45

CERTIFICATE OF PERSONS CONDUCTING BUSINESS
UNDER ASSUMED NAME - ACT NO. 151, P.A. 1949

STATE OF MICHIGAN }
COUNTY OF } SS. _____, the undersigned, whose name(s) _____ signed in full
(We or I) (We or I)
below, do hereby certify, in pursuance with Act No. 151, P.A. 1949, as amended, for the State of Michigan, that _____,
(We or I)
the undersigned *now own (or) intend to own, conduct and transact business at _____

Township/City _____, Michigan, Zip _____ under the assumed name, designation and
style of _____

And _____ do further certify that the true and real full names of all the persons *who
(We or I)
now own (or) who intend to own, conduct and transact the same, together with the residence addresses of each of the said
persons, are as follows, viz:

PRINT OR TYPE NAMES AND ADDRESSES			
NAME	STREET ADDRESS	CITY OR TOWN	ZIP

In Witness Whereof, _____ have this _____ day of _____
_____, made and signed this certificate.
(Year)

THIS CERTIFICATE EXPIRES _____
(Year)

SIGNATURES OF PERSONS CONDUCTING BUSINESS UNDER ASSUMED NAME

STATE OF MICHIGAN }
COUNTY OF } SS. On this _____ day of _____, _____
(Year)

before me, a Notary Public, personally appeared the above named person or persons, whose signatures appear above, and
who executed the foregoing instrument, and _____ he _____ acknowledged to me that _____ he _____ executed the
same, and that they are all of the persons owning, conducting and transacting or who intend to own, conduct and transact the
business under the above name, style and designation.

Subscribed and sworn before me on _____, _____ County, Michigan.
(Date)

My commission expires: _____ Signature: _____
(Date)

Notary public, State of Michigan, County of _____

STATE OF MICHIGAN }
COUNTY OF } SS.

Clerk of the County aforesaid and Clerk of the Circuit Court for said County, do hereby certify that I have compared the
within copy of Certificate setting forth the full names of the persons owning, conducting or transacting business under the
name of _____

together with the certificate of filing endorsed thereon, with the original Certificate heretofore filed and now remaining in
my office, and that it is a true and correct copy thereof, and of the whole of such original Certificate and of said certificate of
filing.

In Testimony Whereof, I have hereunto set my hand and
affixed the seal of said Circuit Court, this _____
day of _____
(Year)

County Clerk

Deputy Clerk

* Strike out the words that are not applicable to the case.

NOTE: This Certificate must be renewed within five (5) years from date. If you change your place of business you must
notify this office. If you change the personnel above listed you must file Notice of Dissolution and a new Certificate
with this office. If you discontinue your business you must file Notice of Dissolution with this office.