STATE OF ILLINOIS,
COUNTY OF ..... } ss.

File No. .....

CERTIFICATE

The undersigned person or persons do hereby certify that our business is or is to be conducted or transacted under the name of .....

that its location is or will be .....
(street address)

in the .....
(city or village of)

in the County of ....., State of Illinois, and that the true or real full name or names of the person or persons owning, conducting or transacting the same with the post office address or address of said person or persons is as shown below.

.....
Name Address City or Village

.....
Name Address City or Village

.....
Name Address City or Village

Dated ....

STATE OF ILLINOIS,
COUNTY OF ..... } ss.

Personally appeared before me

....., ...,

....., ...,

....., ...,

who duly acknowledged that they executed the above certificate.

Dated ....
Notary Public.

NOTE: Strike out words "or is to be" and "or will be" in the certificate if the business is already operating.