TOWN OF NORTH HAVEN
MEMORIAL TOWN HALL
18 CHURCH STREET
NORTH HAVEN, CT 06473

TRADE NAME CERTIFICATE

The undersigned **do/does** hereby certify that **he/she/they** own, conduct and transact the business of:

_____
(Type of Business)

under the assumed name of: _____
(Name of Business)

And that the address of said business is as follows:

_____
(Address of Business)

and that there are no other persons associated with the undersigned in the conduct of said business; and that address/addresses given below is/are correct.

IN WITNESS WHEREOF, **I/We** have hereunto set **my/our** hand at **NORTH HAVEN** this _____ day of _____, 20____.

(1) Name: _____ _____
Print Signature

Residence Address: _____

(2) Name: _____ _____
Print Signature

Residence Address: _____

(3) Name: _____ _____
Print Signature

Residence Address: _____

STATE OF CONNECTICUT}

ss: NORTH HAVEN

COUNTY OF NEW HAVEN}

On this _____ day of _____, 20____, before me, the undersigned notary public, personally appeared _____ satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

IN WITNESS WEREOF I HEREUNTO SET MY HAND.

_____ My Commission Expires: _____
Notary Public

FOR OFFICE USE ONLY

The above and foregoing is a true copy of the original certificate on file in the office of the Town Clerk in the Town of **NORTH HAVEN**.

Attest:_____ TRADE NAME # _____
Town Clerk