

**COUNTY OF NEWAYGO – OFFICE OF COUNTY CLERK
1087 NEWELL ST., PO BOX 885, WHITE CLOUD, MI 49349**

D.B.A. File No. _____

BUSINESS REGISTRATION CERTIFICATE

Certificate Exp. _____

PERSON CONDUCTING BUSINESS UNDER ASSUMED NAME, OR PARTNERSHIP

Certificate Filed _____

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A. of Mich., 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 Newaygo, State of Michigan, under the name, designation or style set forth below:

(Complete Mailing Address)

FILING FEE \$10.00

<p>1. Name of Business _____</p> <p>2. Address of Business _____</p> <p>PO Box (if applicable) _____</p> <p>City, State and Zip _____</p>	
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3. NAME OF PERSON OR PERSONS, owning, conducting, transacting, or composing the above business, and the home post office address of each.

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

4. PARTNERSHIP CERTIFICATE. The Undersigned hereby certify under the provisions of P.A. No. 164, of Michigan for the year 1913, as amended, that:

- (a) The Business mentioned herein (Insert "**IS**" or "**IS NOT**") _____ a Partnership.
(If the Business IS a Partnership, fill in the blank line under (b) below.)
- (b) Length of Time Partnership is to Continue. (Insert either the Term agreed on by the Partners, or the statement "not limited by partnership contract"): _____

5. SIGNATURES OF ALL PERSONS LISTED ABOVE - Acknowledged before a Notary Public

(Signature) _____

(Signature) _____

(Signature) _____

(Signature) _____

**STATE OF MICHIGAN
COUNTY OF NEWAYGO**

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

(SIGNATURE) _____

(PRINT) _____

Notary Public, _____ County, Michigan

My Commission expires: _____

(This section for County Clerk Use)

**STATE OF MICHIGAN
COUNTY OF NEWAYGO**

I, **JASON VANDERSTELT**, Clerk of the County of Newaygo and of the Circuit Court thereof, do hereby certify that I have compared the foregoing copy of Business Registration Certificate with the original of record in my office, and that the 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 White Cloud, this _____ day of _____ A.D. 20____.

By: _____ County Clerk