

MAUREEN REYNOLDS

CLERK OF SUPREME & COUNTY COURTS

COUNTY CLERK

320 N. TIOGA STREET COURT HOUSE, ITHACA, NY 14850 TELEPHONE (607) 274-5431 FAX (607) 274-5445

**BUSINESS CERTIFICATE** 

## I HEREBY CERTIFY THAT I AM CONDUCTING OR TRANSACTING BUSINESS UNDER THE NAME OR DESIGNATION OF

(BUSINESS NAME)						
Ат						
(BUSINESS STREET AD	DRESS)	(CITY)	(STATE)	(ZIP)	(COUNTY)	
MY FULL NAME IS						
AND I RESIDE AT	TREET ADDR		(CITY)	(STATE)	(ZIP)	
(3		233/	(en l)	(SIAIL)		
I FURTHER CER	TIFY TH	τ μα Ι ται	HE SUCCES			
(NAME OF PREVIOUS BUSINI	ESS AND OWI	NER)				
THE PERSON OR F				G SUCH NA	ME OR NAME	STO
IN WITNESS WH	IEREOF	F, I HAVE S	SIGNED THIS	6 CERTIFIC.	ATE ON	
Date		Sig	NATURE			
STATE OF NEW YORK COUNTY OF TOMPKINS	5					
ON	BEFORE ME, THE UNDERSIGNED PERSONALLY APPEARED					
PERSONALLY KNOWN THE INDIVIDUAL(S) WHO ACKNOWLEDGED TO M AND THAT BY HIS/HER PERSON UPON BEHALF	OSE NAME IE THAT HE /THEIR SIC	(S) IS (ARE) /SHE/THE SNATURE(S)	SUBSCRIBED TO ( EXECUTED TH ON THE INSTRI	O THE WITHIN E SAME IN HIS UMENT, THE IN	INSTRUMENT AN 5/HER/THEIR CA NDIVIDUAL(S), OF	ND APACITY(IES), R THE

NOTARY PUBLIC