

Saratoga County Clerk



40 McMaster Street
Ballston Spa, NY 12020
(518)885-2213

AMENDED BUSINESS CERTIFICATE

The undersigned hereby certify that a certificate of doing business was issued under the assumed name of:

Original Business Name _____

Original Business Address _____

(Street Address)

(City)

(State)

(Zip Code)

(County)

was filed in the Saratoga County Clerk's Office, State of New York on _____ under Instrument Number _____ and last amended certificate was filed on _____ under Instrument Number _____.

It is hereby certified that this amended certificate is made for the purpose of more accurately setting forth the facts recited in the original certificate or the last amended certificate and to set forth the following changes in such facts

IN WITNESS WHEREOF, I/We have signed this certificate on _____.

Signature

Signature

Signature

STATE OF NEW YORK
COUNTY OF SARATOGA

On _____ before me, the undersigned personally appeared

personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose names(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signatures(s) on the instrument, the individuals(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public