40 MC MASTER ST, BALLSTON SPA, NY 12020

## AMENDED BUSINESS CERTIFICATE

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

Original Business Name:					
Original Business Address:					Saratoga
	(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 arcertificate or the last amended address.					_
IN WITNESS WHEREOF	, I/WE have signed this certific	eate on		_·	
				Signature	
				Signature	
				Signature	
STATE OF NEW YORK COUNTY OF SARATOGA					
Onb	efore me, the undersigned person	onally appeared			
		(Name)			
personally known to me or pro to the within instrument and his/her/their signature(s) on the instrument.	acknowledged to me that he	she/they executed the	ne same in his/h	er/their capacity	v(ies), and that by
			Notar	y Public	