

BUSINESS CERTIFICATE FOR PARTNERS

The undersigned do hereby certify that they are conducting or transacting business as members of a partnership under the name or designation of:

Name of Business

Address of Business

Address of Business

County of ST. LAWRENCE, State of New York, and do further certify that the full names of all the persons conducting or transacting such partnership including the full names of all the partners with the residence address of each such person, and the age of any who may be infants, are as follows:

NAME: (Specify which are infants and state ages)

RESIDENCE:

WE DO FURTHER CERTIFY that we are the successor in interest to

(Name of individual said business was purchased from-if applicable)

the person or persons heretofore using such name or names to carry on or conduct or transact business.

IN WITNESS WHEREOF, we have this _____ day of _____ in the year 20 _____,

Made and signed this certificate.

State of New York
County of St. Lawrence ss:

On the _____ day of _____ in the year, before me, the undersigned, a Notary Public in and for said State, personally appeared _____

Personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(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 signature(s) on the signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public's Signature