CHANGE OF BUSINESS LOCATION CERTIFICATE

Meredith Place | KALAMAZOO COUNTY CLERK & REGISTER OF DEEDS

PHONE: (269) 383-8840 | EMAIL: DBACPFILING@KALCOUNTY.COM |\$10.00 FILING FEE

THE UNDERSIGNED hereby certifies, the change of the place of business as follows: NAME OF BUSINESS	
NEW ADDRESS	
DATE OF RELOCATION:	PHONE:
Signature of Person(s) Conducting Business Und Assumed Name or Co-Partner(s)*	er an Printed Name
	ust sign the certificate before a Deputy County Clerk or Notary Public. icate before a Deputy County Clerk or Notary Public.
Subscribed and sworn to by	before me on
	Print Name:
Deputy Clerk / Notary Public Signature	State of Michigan, County of
	My Commission Expires:
	Acting in the County of:
DO NO	OT WRITE BENEATH THIS LINE
CERTIFICATE EXPIRES:	20 (5 years minus 1 day from filing date)
State of Michigan, County of Kalamazoo} ss	
	zoo and of the Circuit Court thereof, do hereby certify that I have cord filed in my Office, and that it is a true copy thereof.
In Testimony Whereof, I have hereunto set my h	and and have affixed the seal of said Circuit Court on,
	Meredith Place, Kalamazoo County Cleri
Bv.	Denuty County Cler