

# SUPPLEMENTARY CERTIFICATE OF OWNERSHIP OF BUSINESS

(CHANGE OF OWNER'S NAME - \$5.00)

File No. \_\_\_\_\_

STATE OF ILLINOIS,            )  
                                                   ) SS.  
 COUNTY OF McHENRY        )

On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the original certificate of ownership was filed in the office of the County Clerk for

Name of Business \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the following person or persons changed their name(s) and still has/have a financial interest in the business carried on under such assumed name:

NAME OF PERSONS (Print)	STREET ADDRESS (Print)
CURRENT NAME ON DBA:	STREET:
PHONE:	CITY/STATE/ ZIP:
NEW NAME:	STREET:
PHONE:	CITY/STATE/ ZIP:

STATE OF ILLINOIS,            )  
                                                   ) SS.  
 COUNTY OF McHENRY        )

\_\_\_\_\_  
 PRINTED NEW NAME

being duly sworn, upon oath deposes and says that the foregoing is a true and correct supplementary report of the person or persons who have changed his or her name(s) together with their post-office addresses.

\_\_\_\_\_  
 SIGNATURE

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
 \*County Clerk or Notary Public

\*Strike the one that does not apply.

CANNOT CHANGE THE NAME OF THE BUSINESS