

BUSINESS REGISTRATION CERTIFICATE

D.B.A. File No. _____

PERSON CONDUCTING BUSINESS UNDER ASSUMED NAME, OR PARTNERSHIP

Certificate Exp. _____

County of Keweenaw, Office of County Clerk

Certificate Filed _____

Dissolved _____

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A. of Mich., for the year 1907, as amended, that the following person (or persons) now owns, carries on, conducts or transacts, or intends to own, carry on, conduct, or transact, a business, or maintain an office or place of business, in the County of Keweenaw, State of Michigan, under the name, designation or style set forth below:

FILING FEE \$10.00

1.	Name of Business	
2.	Address of Business	
	Mailing Address if different	<input type="checkbox"/> City <input type="checkbox"/> Township

INDIVIDUAL

3. NAME OF PERSON OR PERSONS, owning, conducting, transacting, or composing the above business, and the home post office address of each.

NAME OF PERSON	RESIDENCE ADDRESS (Street, City, State)
(Print) _____	_____
(Print) _____	_____
(Print) _____	_____
(Print) _____	_____

GENERAL

4. PARTNERSHIP CERTIFICATE. The Undersigned hereby certify under the provisions of P.A. No. 164, P.A. of Mich., for the year 1913, as amended, that:

- (a) The Business mentioned herein (Insert "**IS**" or "**IS NOT**") _____ a Partnership.
(If the Business "**IS**" a Partnership, fill in the blank line under (b) below.)
- (b) Length of Time General Partnership is to Continue. (Insert either the Term agreed on by the Partners, or the statement "not limited". _____)

5. SIGNATURES OF ALL PERSONS LISTED ABOVE - (Signature) _____
 Acknowledged before a Notary Public. (Signature) _____
 (Signature) _____

STATE OF MICHIGAN
 COUNTY OF KEWEENAW

Subscribed and sworn to before me this _____ day of _____ A.D., _____ by all the persons listed above.

(Signature) _____
 (Print) _____
 Notary Public, Keweenaw County, Michigan
 My Commission Expires: _____

(Form below for use of County Clerk)

STATE OF MICHIGAN COUNTY OF KEWEENAW

I, Julie Carlson, Clerk of the County of Keweenaw and the Circuit Court thereof, do hereby certify that I have compared the foregoing copy of Business Registration Certificate with the original of record in my office, and that the same is a correct transcript therefrom, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Circuit Court, this _____ day of _____ A.D., _____.

Julie A. Carlson, Keweenaw County Clerk By: _____
County Clerk/Deputy County Clerk