
Certificate Expiration Date

OFFICE of the COUNTY CLERK/
REGISTER OF DEEDS
VITAL RECORDS DIVISION
CERTIFIED BUSINESS REGISTRATION

DBA File Number

Certificate Effective Date

Dissolved

Michelle M. Stevenson
County Clerk

Jamie L. Paille
Chief Deputy Clerk



Original

Renewal

Name of Business: _____

Address of Business: _____ Township/City: _____

Mailing Address *if different*: _____

Email Address: _____ Phone: _____

THE UNDERSIGNED hereby certifies, under the provisions of P.A. 101 of Michigan, for the year 1907, as amended that the following person (or persons) now owns, carries on 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 Roscommon, State of Michigan, under the name, designated or style set forth below:

ASSUMED NAME: **OR** **CO-PARTNERSHIP:**

PARTNERSHIP CERTIFICATE: The Undersigned hereby certify under the provisions of P.A. 164 of Michigan for the year 1913, as amended, that:

- (a) The Business mentioned herein (Insert "IS" or "IS NOT") _____ a Partnership.
- (b) Length of time General Partnership is to continue (Insert *either* the Term agreed on by the Partners *or* the statement "not limited") _____

Name of Person or Persons, owning, conducting, transacting, or composing the above business, and the mailing address of each:

NAME OF PERSON **RESIDENCE (Street, City, State, Zip)**

(Print) _____

(Print) _____

(Print) _____

SIGNATURES OF ALL PERSONS LISTED ABOVE
Acknowledged before a Notary Public

(Signature) _____

(Signature) _____

(Signature) _____

Acknowledged before me this _____ day of _____ A.D. 20 _____, by all persons listed above

State of Michigan (Signature) _____
County of (Print) _____

Notary Public, _____ County

My Commission Expires: _____

Acting in the County of: _____

State of Michigan, County of Roscommon

I, Michelle M. Stevenson, Clerk of the County of Roscommon and of the Circuit Court thereof, do hereby certify that I have compared the foregoing copy of Business Registration Certificate with the original on record in my office, and that 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. 20 _____

Michelle M. Stevenson, Roscommon County Clerk/Register of Deeds

By: _____
County Clerk/Deputy Clerk