MACOMB COUNTY			Anthony G. Forlini	
BUSINESS REGISTRATION CERTIFICA CONDUCTING BUSINESS UNDER SOLE-PROPRIETOR OR CO-PAR		A A A A A A A A A A A A A A A A A A A	Clerk/Register of Deeds	
New Renewal		CHIG		
THE UNDERSIGNED hereby certifies, under the provis following person, or co-partnership, now own, carry o business or maintain an office or place of business in t	on, conduct or trai	nsact or intends to ow omb, State of Michiga	n, carry on, conduct, or transact, a	
BUSINESS MENTIONED HEREIN IS A: \$	LE-PROPRIETORSH	IP CO-PAR		
1. NAME OF BUSINESS:				
2. ADDRESS OF BUSINESS:				
3 BUSINESS PHONE NUMBER:	(Complete Mailing Address)			
 NAME OF PERSON(S) owning, conducting, tr office address of each: 	ansacting orcomp		ess, and the home post	
(Print)				
(Print)				
(Print)				
(Print)				
5. SIGNATURES OF ALL PERSONS LISTED	DABOVE MU	T BE SIGNED BEFORE A NOTARY	PUBLIC*	
STATE OF MICHIGAN **CO-PARTNERSHIP ONLY COUNTY OF MACOMB	** of 1913, as ame	hereby certifies under the j nded, that the business nar DEFORE A NOTARY PUBLIC®	provisions of Michigan P.A. No. 164 ned herein is a partnership.	
۱,			partners of the firm all co-partners of the firm	
individually signed their respective names at co-partner is correct.				
	Signature:	(One of the Co-Pa	tners of above named firm)	
Subscribed and sworn to before me this	. Signature:			
day of, 20	-			
	Print:	Notary Public		
1				

My Commission expires: ____

NOTE: This Certificate must be renewed in five (5) years from file date. If you change your business address, you must file a "Change of Address" form with Macomb County. If you change the personnel listed above, the owner must file a Notice of Dissolution and the new owner needs to file a new DBA. 'Person' means one or more individuals, partnerships, trusts, fiduciaries, or other entities capable of contracting, except corporations and limited partnerships.