Business Certificate

I, hereby certify to designation of:	hat I am conduc	ting or transa	cting business	under th	ne name or
at this location:					
County of Oneida,	State of New York				
My full name is:					
I reside at:					
If under 18 years,	state "I am	years of age). "		
I further certify that using such name of			•	•	s heretofore
In Witness whereof,	I have this date		made and	signed thi	s certificate:
(prin	t name)			(signature)	
State of New York County of Oneida					
On the	_ day of	in the	year		
	(Notary or Co	ommissioner of De	eds signature)		
before me the undersig personally known to me, subscribed to be within capacity(ies) and that by individual(s) acted, execu	or proved to me on the ba instrument and acknow his/her/their signature(s) of	sis of satisfactory ev ledge to me that	idence to be the ind he/she/they execut	lividual(s) who ted the same	ose name is (are) e in his/her/their
		For county use onl (bar code label)	у		