

SUPPLEMENTARY CERTIFICATE OF OWNERSHIP OF BUSINESS

(CHANGE OF BUSINESS / OWNER - ADDRESS - \$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 address where said BUSINESS is conducted was changed

From _____ City, State, Zip _____

To _____ City, State, Zip _____

On the _____ day of _____, _____, the following OWNER(s)

Name of Owner _____ doing business under the above assumed name changed the residence address

From _____ City, State, Zip _____

To _____ City, State, Zip _____

Phone Number _____

Name of Owner _____ doing business under the above assumed name changed the residence address

From _____ City, State, Zip _____

To _____ City, State, Zip _____

Phone Number _____

Publication is again required for the above changes with the exception of a withdrawal of name. Publication is required only if the withdrawal of name involves 25% or more of the total ownership.

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

_____, _____, being duly sworn, upon oath deposes and says that the foregoing is a true and correct supplementary report for the change of address in the above assumed name business and/or business owner(s).

SIGNATURES

Subscribed and sworn to before me this _____ day of _____, _____

*County Clerk or Notary Public

*Strike the one that does not apply.