

Prepared by: _____
 Address: _____
 Phone No. _____
 Email Add: _____
 Email Required for Renewal Notification
 \$10.00 Filing Fee Required

**CERTIFICATE OF BUSINESS, TRADE, ASSUMED, OR FICTITIOUS NAME
 (SDCL CHAPTER 37-11)**

The undersigned hereby certifies that I/WE engage in and operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

_____ and that the names, post office address, and residence addresses of each person owning or having interest in said business are as follows:

NAME OF OWNER	POST OFFICE ADDRESS	RESIDENCE ADDRESS

That the address where the main office of such business is to be maintained is

_____.

Signature of Owners

Executed on this ____ day of _____, 20__.

STATE OF SOUTH DAKOTA

SS

COUNTY OF _____

(PRINT NAME OF OWNERS AGAIN ON THIS LINE DIRECTLY ABOVE)

Subscribed and Sworn to before me, this
 _____ Day of _____, 20__.

 NOTARY PUBLIC
 My Commission Expires: _____

Being first duly sworn, each for himself or herself says that he or she has read the foregoing certificate and knows the contents thereof and that the same is true.

Signature of Owners