

TRADE NAME CERTIFICATE

The undersigned hereby certify that [I / We] conduct and transact the business in said Town of Easton, Connecticut under the full trade name of:

(Print Business Name Above)

(Print a Brief Description of Type of Business)

(Print the STREET AND CITY Address of the Business)

(Print the TELEPHONE NUMBER and WEBSITE of the Business if applicable)

And that there are no other persons associated with the undersigned in the conduct of said business; and that the residence address(es) given below are correct.

Signature , City/Town	,		
, City/Town			
City/Town			
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<u>Cian atuma</u>		n Lip	
Cionatuna			
Signature			
,	,		
City/Town	Stat	te Zip	
ss: Easton			
, 20, befo	ore me, the	e undersign	ned officer,
		, s	satisfactorily
to the within inst			
	, <u>City/Town</u> ss: Easton , 20, bef	, <u>City/Town</u> , <u>Sta</u> ss: Easton , 20, before me, th to the within instrument an	, <u>City/Town</u> , <u>State</u> Zip ss: Easton , 20, before me, the undersign , s to the within instrument and acknowle

IN WITNESS WHEREOF I HEREUNTO SET MY HAND.

Name

The above and foregoing is a true copy of the original Certificate on file in the office of the Town Clerk of the Town of Easton ATTEST:

Town Clerk