

FILING FEE: \$5.00



CERTIFICATE #: _____

CHANGE OF ADDRESS / PHONE # FOR DBA/CO-PARTNERSHIP

TO THE COUNTY CLERK,
BERRIEN COUNTY, MICHIGAN

NOTICE IS HEREBY GIVEN THAT THE CHANGE OF PLACE OF BUSINESS

of _____
(NAME OF BUSINESS AS REGISTERED)

OLD ADDRESS: _____
NO STREET (INDICATE STREET, DRIVE, AVENUE, NE, SE, ETC..) _____
CITY STATE ZIP

NEW ADDRESS: _____
NO STREET (INDICATE STREET, DRIVE, AVENUE, NE, SE, ETC..) _____
CITY STATE ZIP

NEW PHONE #: _____

SIGNATURE(S) OF CO-PARTNERS OR SOLE PROPRIETOR OF BUSINESS

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

STATE OF MICHIGAN)
) SS
COUNTY OF BERRIEN)

SUBSCRIBED AND SWORN TO BEFORE ME ON _____, 20 ____
BY ALL OF THE PERSONS LISTED ABOVE.

NOTARY PUBLIC, BERRIEN COUNTY, MICHIGAN; ACTING IN
_____ COUNTY

MY COMMISSION EXPIRES: _____

STATE OF MICHIGAN)
) SS
COUNTY OF BERRIEN)

I, SHARON J. TYLER, CLERK OF THE COUNTY OF BERRIEN AND OF THE
CIRCUIT COURT, THEREOF DO HEREBY CERTIFY THAT THE COPY ATTACHED ABOVE
IS A TRUE COPY OF THE RECORD NOW ON FILE IN THE OFFICE OF CLERK OF SAID
COUNTY AND COURT.

IN TESTIMONY WHEREOF, I HAVE HEREUNTO SET MY HAND AND OFFICIAL
SEAL AT THE CITY OF ST. JOSEPH, IN SAID COUNTY ON

_____, 20 ____

SHARON J. TYLER, BERRIEN COUNTY CLERK

By: _____ DEPUTY COUNTY CLERK