

BUSINESS REGISTRATION CERTIFICATE
PERSON CONDUCTING BUSINESS UNDER ASSUMED NAME, OR PARTNERSHIP
County of Iron, Office of County Clerk

D.B.A. File No. _____
 Certificate Exp. _____
 Certificate Filed _____
 Dissolved _____

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A. of Mich., for the year 1907, as amended, that the following person (or persons) now owns, carries on, conducts or transacts, or intends to own, carry on, conduct, or transact, a business, or maintain an Office Or place of business, in the County of Iron, State of Michigan, under the name, designation or style set forth below:

FILLING FEES \$15.00

1.	Name of Business _____
2.	Address of Business _____
	Mailing Address if different U City Q Township _____

INDIVIDUAL

3. NAME OF PERSON OR PERSONS, owning, conducting, transacting, or composing the above business, and the home post office address of each.

NAME OF PERSON	RESIDENCE ADDRESS (Street, City, State)
(Print) _____	_____
(Print) _____	_____
(Print) _____	_____
(Print) _____	_____

GENERAL

4. PARTNERSHIP CERTIFICATE. The Undersigned hereby certify under the provisions of P.A. No. 164, P.A. of Mich., for the year 1913, as amended, that:

(a) The Business mentioned herein (Insert "IS" or "IS NOT") _____ a Partnership.
(If the Business IS a Partnership fill in the blank line under (b) below.)

(b) Length of Time General Partnership is to continue. (Insert either the Term agreed on by the Partners, or the statement "not limited") _____

5. SIGNATURES OF ALL PERSONS LISTED ABOVE - Acknowledged before a Notary Public.

(Signature) _____
 (Signature) _____
 (Signature) _____
 (Signature) _____

STATE OF MICHIGAN
 COUNTY OF IRON

Subscribed and sworn to before me, this _____ day of _____
 A.D., _____ by all persons listed above.

(Signature) _____
 (Print) _____

Notary Public, Iron County, Michigan.

My Commission expires: _____

(Form below for use of County Clerk)

STATE OF MICHIGAN
 COUNTY OF IRON

1, Joan Luhtanen, Clerk of the County of Iron and the Circuit Court thereof, do hereby certify that I have compared the foregoing copy of Business Registration Certificate with the original of record in my office, and that the same is a correct transcript therefrom, and of the whole of such original,

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Circuit Court, at the City of Crystal Falls, this _____ day of _____ A.D., _____

Joan Luhtanen, Iron County Clerk By: _____

County Clerk(Deputy Count); Clerk