

Filing Fee: \$20 Payable to town clerk, per C.G.S. § 7-34

ile with the Town Clerk in the			
ling Type - The information contai			
ease Note: A trade name certificate is requi at is different than their real name. A trade	ired when an individual is conducting name certificate does not protect the	business under a name (used to identify that business name from use by someone else	ne busin
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Use this addendum if 3 or more persons are associated with the trade name. This addendum must be attached to the Trade Name Application (Natural Persons). Natural Persons Associated with this Trade Name (person 3): Full Name: ______ Signature: _____ Address, Town/City: State, ZIP Code: _____ Email: _____ Phone: ____ Natural Persons Associated with this Trade Name (person 4): Full Name: Signature: ____ Address, Town/City: State, ZIP Code: _____ Email: _____ Phone: ____ Natural Persons Associated with this Trade Name (person 5): ______ Signature: ______ Address, Town/City: State, ZIP Code: _____ Email: _____ Phone: _____ Acknowledgment for Natural Person(s): State of Connecticut, County of ______ ss. _____ss. On this ______, 20 _____, before me _____ (Name of Town Clerk/Notary) the undersigned officer, personally appeared the natural person(s) contained herein, known to me/or satisfactorily proven to be the person(s) whose name(s) is/are subscribed to within the instrument and acknowledged that they executed the same for the purposes therein contained. Date: Signature: (Town Clerk, Notary Public, Justice of the Peace, or Commissioner of the Superior Court) I certify the foregoing is a true copy of the original filed in: (Town/City) Date: Signature: (Town Clerk) Town Clerk Only Filing Date: _____ Expiration Date: Filing Number (optional): Volume and Page (optional):



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"business address" on file v		he State), file in the town of your usinesses (formed elsewhere), use the of your resident agent.		
Filing Type - The information	n contained herein (choose one):	Original Amendment		
Trade Name:				
State, ZIP Code:	Email:	Phone:		
Business Organization	Associated with this Tra	ade Name		
Business Name:				
Secretary of the State Busi	ness ID/ALEI:			
Address, Town/City:	·			
State, ZIP Code:	Email:	Phone:		
Authorized Officer:		Title:		
Signature of Authorized Of	ficer			
•	usiness Organizations			
<u>-</u> -	-			
State of Connecticut, County	or	SS(Town/City)		
On this day of	, 20,	(Town/City) before me(Name of Town Clerk/Notary)		
	. who acknowledged them	(Name of Town Clerk/Notary) nselves as		
(Name of Business Organization O	fficer)	(Title of Business Organization Officer)		
of(Name of Business Organiza	, a business organizatio	on filed with the Secretary of the State, and tha		
they are authorized to file this				
ot				
Signature: (Town Clerk, Notary Public Bustice o	f the Peace, or Commissioner of the Sup	Date:		
•				
I certify the foregoing is a	true copy of the original filed	1 in; (Town/City)		
Signature:		Date:		
(Town Clerk)				
	Town (Clerk Only		
	Filing D	Filing Date:		
	i	ion Date:		
	Filing N	lumber (optional):		
	Volume	Volume and Page (optional):		



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The following trade name is canceled: This trade name cancellation should be filed in the town where the trade name was originally filed. By filing this cancellation, you are affirming: (1) that you are authorized to do so; and (2) that business is no longer transacted in this state under this name.

Trade Name:		· · · · · · · · · · · · · · · · · · ·
Original Filing Date:		
Original Trade Name ID Number:	£	
Full Name:		an control of the con
Signature:		Date:
(Signature of Person Authorizing Cancellation)	1	Date.
, ,		
To be severaleted by Netsuy Dublic or	Form Cloubs	
To be completed by Notary Public or	iowii cierk:	
Subscribed and sworn to before me on this	day of	, 20
Signature:		Date:
(Town Clerk, Notary Public, Justice of the Peace, or Commiss	ioner of the Superior Court)	
I certify the foregoing is a true copy of the c	original filed in:	
		(Town/City)
Signature:		Date:
(Town Clerk)		
	Town Clerk Only	
	Filing Date:	
	Expiration Date:	
	Filing Number (optional):	
	Volume and Page (optiona	l):