

Stratford Town Hall, 2725 Main Street, Stratford, CT 06615 Phone: 203-385-4020 • Fax: 203-385-4005 www.townofstratford.com



AMENDMENT - TRADE NAME CERTIFICATE

The undersigned <u>do/does</u> hereby certify that <u>he/she/they</u> owned, conducted and transacted business under the assumed name of:	
(NAME OF BUSINESS)	
at the following address:	
(ADDRESS OF BUSINESS) in the County of Fairfield, State of Connecticut, and that a certificate of conducting business under an assumed name was filed in the Office of the Town Clerk, Stratford, CT.	
Trade Name Number:	Dated:
I hereby further certify that the filing of said certificate is no longer required for the reason that the said business was terminated on: Amendment Date:	
I hereby further certify that the filing of said certificate is amended as follows:	

Name: PRINT	SIGNATURE
STATE OF CONNECTICUT } COUNTY OF }	ss:
On this day of	, 20, before me, the undersigned notary public, personally
and satisfactorily proven to be the person/s whose name is subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. IN WITNESS WEREOF I HEREUNTO SET MY HAND.	
Notary Public	My Commission Expires:
The above and foregoing is a true copy of the original certificate on file in the office of the Town Clerk, Stratford, CT.	
Attest:	
Town Clerk	

Please Retain a Copy of This Form For Your Records.

Filing Fee: \$10.00. Please make check payable to: "Town of Stratford"

Effective: 1/1/2021