



18 N. County Street, Rm. 101
Waukegan, IL 60085
(847) 377-2400

ASSUMED BUSINESS NAME
Change of Owner's Legal Name, Address,
Business Address, or Addition
\$5.00 Filing Fee

Name of Business: _____

Original Date Filed: _____

Owner's legal name or address changed from:

to:

Name

Name

Street

Street

City, State, Zip

Phone

City, State, Zip

Phone

Business address changed from:

to:

Legal street address – No P.O. box

Legal street address – No P.O. box

City, State, Zip

Phone

City, State, Zip

Phone

Add / change the "mail to" business address or additional business situs address:

Street

City, State, Zip

STATE OF ILLINOIS)
COUNTY OF LAKE)

This is to certify the above change(s) to the named business have been made effective on _____, 20__.

Owner's Signature

Owner's Signature

Street

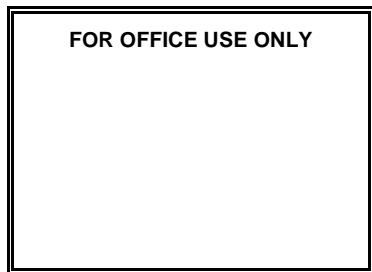
Street

City, State, Zip

Phone

City, State, Zip

Phone



The foregoing instrument was acknowledged before me by

name(s) of person(s) who appeared and signed before Notary Public Printed

name(s) of person(s) who appeared and signed before Notary Public Printed

on this _____ day of _____, 20_____.

Signature of Notary Public

Place notary seal below