

CASS COUNTY CLERK & RECORDER **Shelly Wessel**

100 E. Springfield Virginia, IL 62691

Supplementary Certificate of Change of Assumed Name (Filing fee of \$5.00)

On the	day of	, 20 an original	Assumed Business Name Certificat	te was filed in the Office of the Cass County	
On this	he name day of	, 20the followi	ing person(s) wish(es) to have the fo	llowing change(s) made to the above	
Assumed Nar	ne Certificate	by filing this Supplementary Certificate	with the Office of the County Clerk	i.	
		iness Address Change ler(s) Address Change			
		ner Legal Name Change			
				<u> </u>	
ldress	PublicationNOT Required)	Previous Address of Business			
Business Address Change		City	State	Zip	
		New Business Address/or Additional Address			
		City	State	Zip	
	BZDERGIDED				
OwnerAddress	PublicationNOT Required)	Owner Name	Owner Name Phone Number		
		Previous Address			
		City	State	Zip	
		New Address Owner Name	1000		
		City	State	Zip	
Owner LegalName Change	Publicatio nNOT Required)				
Owner LegalN Change	Pul	Previous Name			
	_				
		New Name			
TATE OF ILLI	NOIS)			
COUNTY OF C	ASS)			
his is to certify	that the undersi	gned, upon oath, deposes and says that the fo	pregoing is a true and correct report of the	e real full name(s) of the person(s) owning the	
Assumed Busine	ss Name listed a	above, and wishes to cancel in whole or in pa	art of the above named certificate.	to total ram name(s) of the person(s) owning the	
Signature)		(Date)	(Signature)	(Date)	
Signature) (Date)		(Signature)	(Date)		
he foregoing in	strument was su	bscribed and sworn to before me this	day of	. 20	
	(SEAL)				
			(Signature of Notary Public)		
(For office use	only) Certificate	. #	river's License/ID		
of office use	omy) Certificate	D	river's License/ID		