

Certificate of Adoption of Trade Name

Type of Business:		
Business Address:		
The full name of every person conductions and person is as follows:	ng or transacting said business, together with the post office	address of each
1. Name:	Mailing Address:	
2. Name:	Mailing Address:	
3. Name:	Mailing Address:	
	Signature (s)	
State of Connecticut	20	
Ss: Somers County of Tolland	, 20	
Personally appeared		,
subscribed and swore to the truth of the same, before me.	the foregoing certificate, and acknowledged that he/she	who e/they executed
	Town Clerk (Asst) – Notary Public	