Certif	icate of Business: Fictitious Firm Na	me Please P	rint or Type
The und	dersigned do hereby certify that(Name of		
	(Name of	individual, corporation, partnership, or trust)	
ocated	at(Street Address of Business or Residence)	is conducting business in	Carson City,
	(Street Address of Business or Residence)		
levada	, under the fictitious name of	s Firm Name)	
	t said firm is composed of the following person(s ng below I do solemnly swear (or affirm), under) whose name(s) and address(es) are as	follows:
1.	Full Name and Title	Signature	 Date
	Street Address	City, State, Zip	· · · · · · · · · · · · · · · · · · ·
	Mailing Address, if different from above	City, State, Zip	
2.	Full Name and Title	Signature	 Date
	Street Address	City, State, Zip	
	Mailing Address, if different from above	City, State, Zip	
3.	Full Name and Title	 Signature	Date
	Street Address	City, State, Zip	
	Mailing Address, if different from above	City, State, Zip	
4.	Full Name and Title	Signature	 Date
	Street Address	City, State, Zip	
	Mailing Address, if different from above	City, State, Zip	
tate of ounty o	of		
On this _	day of, 20, before	me personally appeared:	
ne(she)(o me to be the person(s) described in and who execute they) has (have) executed the same freely and volunta, I have hereunto set my hand and affixed my official s	arily and for the uses and purposes therein st	ated. In Witne
	ublic/Deputy County Clerk	RECEIVED AND FILE	ΞD
arson (City, Nevada	Date	
		bac	
		Deputy County Clerk	
S - 4 4 -	Carson City Business License, 108 E. Proctor St., Carson City		