

Use black ink

REGISTRATION OF FIRM NAME AMENDMENT

STATE OF WISCONSIN, COUNTY OF _____

_____, being first duly sworn deposes and says that he/she recorded a Registration of Firm Name document for the firm doing business under the name of: _____

recorded on (date) _____ as document number _____ in volume _____ (if any) and page _____ (if any). The Registration of Firm Name is hereby amended to: (state change) _____

Recording area

Name and return address:

Use the boxes below if applicable:

Table with 3 columns: NAME, RELATIONSHIP TO THE BUSINESS, ADDRESS

Application is hereby made to amend such firm name recorded with the Register of Deeds.

Signature Date Signature Date
Print name Print name

This document was drafted by: (print or type name below)

Subscribed and sworn to before me on _____ by the above named person(s): _____

Signature of notary or other person authorized to administer an oath (as per s. 706.06, 706.07)

Print or type name: _____

Title _____ Date commission expires: _____

*Names of persons signing in any capacity must be typed or printed below their signature. WRDA 10/11/2005