

**COUNTY OF KENDALL
OFFICE OF THE COUNTY CLERK
111 WEST FOX STREET
YORKVILLE, ILLINOIS 60560**

**SUPPLEMENTARY CERTIFICATE OF OWNERSHIP OF BUSINESS
[CHANGE OF ADDRESS]**

On the ____ day of _____ A.D. _____, the original Certificate of Ownership
No. _____, was filed for:

NAME OF FIRM: _____

LOCATION: _____

SIGNATURE OF OWNER: _____

On the ____ day of _____ A.D. _____, the address (es) where said **business is
carried** on was changed FROM: _____

TO (NEW ADDRESS): _____

On the ____ day of _____ A.D. _____, the following person (s): _____

doing business under the above assumed name, changed their **residence from**;

OLD ADDRESS: _____

NEW ADDRESS: _____

=====

STATE OF ILLINOIS)
) SS
COUNTY OF KENDALL)

This is to certify that the undersigned, upon oath deposes and says that the foregoing is a true and correct supplementary report for the change of address in the above named firm.

(SIGNATURE)

(SIGNATURE)

Subscribed and sworn to before me this ____ day of _____ A.D. 20 ____

Notary Public or County Clerk

NOTE: Change of Address does not require publication.

FILING FEE OF \$5.00 APPLIES