Certificate of Persons Conducting Business As Co-Partnership Filing Fee: \$10.00

Lindsay Oswald St. Joseph County Clerk PO Box 189 Centreville, Michigan 49032

The undersigned hereby, certifies that the following person now owns, intends to own, conducts, or transacts business in the County of St. Joseph, State of Michigan, under the name, designation or style as stated below.

Name of Business:		
Address of Business:		
	R PERSONS owning, con	iducting, transacting or composing the above business and the
NAMES OF PERSON		RESIDENCE ADDRESS CITY, STATE, ZIP
SIGNATURES OF ALL	PERSONS LISTED AB	OVE:
STATE OF MICHIGAN COUNTY OF ST. JOSEPH)) SS)	
On,befo		ally appeared the above named person or persons, whose signature appears above
	NOTARY PU TYPE NAME	UBLIC SIGNATURE
	NOTARY PU	;: BLIC IN
	THIS PORTION TO BE	**************************************
STATE OF MICHIGAN)	
COUNTY OF ST. JOSEPH) SS)	
	ing Business As Co-partnership	Court thereof, do hereby Certify that I have compared the foregoing copy of with the original on record in my office, and that the same is a correct transcript
In Testimony Whereof, I have	hereunto set my hand and affin	xed the seal of said Circuit Court this day of,
	Lindsay Oswald, St. Joseph By Deputy County Clerk	h County Clerk

NOTE: If you change your place of business, you must notify this office. If you change the owners listed above, you must file a Notice of Dissolution and a new Certificate with this office. If you discontinue your business, you must file a Notice of Dissolution with this office.