Kay J. Olson

Grundy County Clerk & Recorder 111 E. Washington Street, Rm. 12 P.O. Box 675 Morris IL 60450-0675 (815) 941-3222

ASSUMED BUSINESS NAME FILING INSTRUCTIONS

NECESSITY OF CERTIFICATE

The following is an excerpt from Chapter 805 of the Illinois Compiled Statutes 405/1:

No person or persons shall conduct or transact business in the State under an assumed name, or under any designation, name or style, corporate or otherwise, other than the real name or names of the individual or individuals conducting or transacting such business, unless such person or persons shall file in the office of the County Clerk of the County in which such person or persons conduct or transact or intend to conduct or transact such business, a certificate setting forth the name under which the business is, or is to be, conducted or transacted, and the true or real full name or names of the person or persons owning, conducting or transacting the same, with the post office address or addresses of such person or persons and every address where such business is, or is to be, conducted or transacted in the county. The certificate shall be executed and duly acknowledged by the person or persons so conducting or intending to conduct the business.

NOTE: CORPORATIONS AND LIMITED PARTNERSHIPS FILE WITH THE SECRETARY OF STATE, YOU SHOULD SEEK LEGAL ADVICE TO DETERMINE WHAT FILINGS ARE NECESSARY IN SUCH CASES.

FILING PROCEDURES

- 1. Complete the Assumed Name Certificate. Please type or print in black ink.
- 2. All owners must sign the certificate in the presence of a Notary Public and have the certificate notarized.
- 3. Return the certificate to our office with the \$39.00 filing fee. At that time a Publication Notice will be issued to you. YOU ARE RESPONSIBLE FOR TAKING THE NOTICE TO THE NEWSPAPER
- 4. The Publication Notice shall be **published within 15 days** after the certificate is filed in the office of the County Clerk. The publication must take place in either the 'Morris Daily Herald' or 'The Coal City Courant'. This notice shall be published once a week for three consecutive weeks.
- 5. Once the publication has been completed, the newspaper will give you a Certificate of Publication. The Certificate of Publication **must be filed with the County Clerk within 50 days** from the date of filing the original certificate. The County Clerk's office will then issue a Certificate of Ownership of Business.

UNLESS PROOF OF PUBLICATION IS FILED WITH THE COUNTY CLERK,

THE ASSUMED BUSINESS NAME CERTIFICATE IS VOID.

WHAT IF THERE ARE CHANGES IN THE BUSINESS INFORMATION?

Change of Address

If there is a change of address of the business, or if a name is added, an additional duly acknowledged certificate must be filed with the County Clerk. Such a certificate shall give the change. When a name is added, the County Clerk's Office shall mark this addition in the index book. Republication **is not** necessary in this case and no fee applies.

Withdrawal or Cancellation

Anyone wishing to withdraw their name from the business shall have this certificate canceled in whole or in part, by filing with the County Clerk's Office a supplementary certificate, showing that they have stopped doing business, or that they have no further connection of financial interest in the business.

The County Clerk's Office will mark "Canceled" with the date, or "Withdrawn" with the name of the party withdrawing. If withdrawal changes ownership 25% or more, republication of a certificate **is** necessary. The fee to cancel an assumed name certificate or to withdraw a name is \$39.00.

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Phone #___

ASSUMED NAME CERTIFICATE

The undersigned person or persons do hereby certify that the information provided on this assumed name certificate is true and correct.

Name of Business:					
Nature of Business:					
Address of Business:					0E
 Name(s) and post office or	residence address(es) of the p	erson(s) owning, cond	ucting or transacting	g business:	
(name)			(name)		yes
(street)			(street)		
(city, state, zip)			(city, state, zip)		ificate?_
(name)			(name)		ERALD Mail Certificate?
(street)			(street)		TY HE
(city, state, zip)			(city, state, zip)		
STATE OF ILLINOIS } }SS. COUNTY OF GRUNDY }					MORRIS DAILY HERALD Mail Ce
This is to certify that the undersigned the true and legal full name(s) of	gned intend(s) to conduct the above n f the person(s) owning, conducting or	amed business from the loc transacting the business is/	cation(s) indicated and that are correct as shown.	hat	
(signature)	(date)	(signature)		(date)	
(signature)	(date)	(signature)		(date)	
]		The forgoing instrur by the person(s) inte	nent was acknow ending to conduct	edged before me the business this
PAIDCheck #_ Receipt #			day of	-	
			Notary Public	(signat	ure)
Filing Date:/_	/ 50 Day	Deadline:/_	/ Cle	erk=s Initials:	