



**Division of Corporations,  
State Records and  
Uniform Commercial Code**

New York State  
**Department of State**  
**Division of Corporations,**  
**State Records and**  
**Uniform Commercial Code**  
One Commerce Plaza  
99 Washington Avenue  
Albany, NY 12231  
www.dos.ny.gov

**Certificate of Assumed Name**

(Pursuant to General Business Law §130)

1. REAL NAME OF ENTITY:

1a. FICTITIOUS NAME, IF ANY, OF FOREIGN ENTITY (Not Assumed Name):

2. THE ENTITY WAS FORMED OR AUTHORIZED UNDER THE FOLLOWING NEW YORK LAW (Check one):

- Business Corporation Law       Limited Liability Company Law       Religious Corporations Law
- Education Law       Not-for-Profit Corporation Law       Revised Limited Partnership Act
- Other (specify law): \_\_\_\_\_

3. ASSUMED NAME OF ENTITY:

4. PRINCIPAL PLACE OF BUSINESS IN NEW YORK STATE (MUST INCLUDE NUMBER AND STREET). IF NONE, CHECK THIS BOX  AND PROVIDE OUT-OF- STATE ADDRESS:

5. COUNTY(IES) IN WHICH ENTITY DOES OR INTENDS TO DO BUSINESS:

- ALL COUNTIES (or check applicable county(ies) below)
- Albany     Cattaraugus     Chenango     Delaware     Franklin     Hamilton     Lewis     Montgomery
- Allegany     Cayuga     Clinton     Dutchess     Fulton     Herkimer     Livingston     Nassau
- Bronx     Chautauqua     Columbia     Erie     Genesee     Jefferson     Madison     New York
- Broome     Chemung     Cortland     Essex     Greene     Kings     Monroe     Niagara
- Oneida     Orleans     Queens     St. Lawrence     Schuyler     Sullivan     Warren     Wyoming
- Onondaga     Oswego     Rensselaer     Saratoga     Seneca     Tioga     Washington     Yates
- Ontario     Otsego     Richmond     Schenectady     Steuben     Tompkins     Wayne
- Orange     Putnam     Rockland     Schoharie     Suffolk     Ulster     Westchester

6. ADDRESS OF EACH LOCATION, INCLUDING NUMBER AND STREET, IF ANY, OF EACH PLACE WHERE THE ENTITY CARRIES ON, CONDUCTS OR TRANSACTS BUSINESS IN NEW YORK STATE. (Use page 2 if needed. The address(es) must be a number and street, city, state and zip code. The address(es) must be within the county(ies) indicated in paragraph 5.) If none, check this box : No New York State Business Location.

Print or Type  
Name of Signer: \_\_\_\_\_ Signature: \_\_\_\_\_

Capacity of Signer (Check one):  Authorized Person     Officer of the Corporation     General Partner of the Limited Partnership  
 Member of the Limited Liability Company     Manager of the Limited Liability Company

