

State of Illinois,  
County of Christian

} ss.

CHAPTER 96  
PARAGRAPH 4  
ILLINOIS REVISED  
STATUTES

### Assumed Name Certificate of Intention

This is to certify that the undersigned intend to conduct and transact a \_\_\_\_\_

Business in said County and State under the name of \_\_\_\_\_  
at the following post office address:

\_\_\_\_\_  
\_\_\_\_\_

Inside City Limits

Outside City Limits

That the true and real full names of all persons owning, conducting or transacting such business, with the respective post-office of each are as follows:

APPLICANT NAME

POSTAL ADDRESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_\_.

Signature \_\_\_\_\_  
Signature \_\_\_\_\_  
Signature \_\_\_\_\_  
Signature \_\_\_\_\_

State of Illinois,  
County of Christian

} ss.

I, \_\_\_\_\_, a Notary Public

in and for said County and State, do hereby certify that \_\_\_\_\_

Personally known to me to be the same person\_\_ whose name \_\_\_\_\_ subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that \_\_he\_\_ ha\_\_ read and signed said instrument and that the statements therein contained, and each thereof, are true.

I hereby certify this is a true copy.

Notary Public

Dated \_\_\_\_\_, 20 \_\_\_\_\_

My commission expires on the \_\_\_\_\_ day  
of \_\_\_\_\_, A.D. 20 \_\_\_\_\_

(County Clerk)