

CERTIFICATE OF ASSUMED NAME FOR A SOLE PROPRIETORSHIP, PARTNERSHIP, LIMITED PARTNERSHIP

The undersigned, proposing to engage in business in _____ County, South Carolina under an assumed name or a partnership name, do hereby certify that:

1. The name under which the business is to be conducted is:

2. The names and addresses of all the owners of the business are:

(Insert name and address of each owner)

In witness whereof, this certificate is signed by each of the owners of said business, this _____ day of _____, 20____.

_____ (seal)

_____ (seal)

_____ (seal)

State of _____

County of _____

I, _____, a Notary Public, do hereby certify that on this _____ day of _____, 20____, personally appeared before me _____

who are all signers of the forgoing instrument, and each acknowledged the due execution thereof.

Witness my hand and official seal, this the _____ day of _____, 20____.

Notary Public(Printed Name)

(The Notary Seal)

My Commission Expires: ____ / ____ / ____