



City of Middletown Town Clerk

245 DEKOVEN DRIVE
P.O. BOX 1300
MIDDLETOWN, CONNECTICUT 06457

(860) 344-3459

Certificate of Adoption of Trade Name

To the Town Clerk of the City of Middletown, I/We, am/are conducting and transacting business in _____ under the full name (dba) of _____ and which has a post office address of _____ and the full name of every person conducting or transacting said business together with the post office address of each said person is as follows:

(PLEASE PRINT)

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

NAME _____ ADDRESS _____

SIGNATURES: _____

State of Connecticut)

) ss: Middletown

Date:

County of Middlesex)

Personally appeared _____ Who subscribed and swore to the truth of the foregoing certificate, and acknowledged that (he, she, they) executed the same, before me.

File #
Fee \$

Town Clerk Assistant Town Clerk
Notary Public Justice of the Peace