## Amended Business/Partners Certificate

THE UNDERSIGNED HEREBY CERTIFY that a certificate of doing business under the name of:

AS ORIGINALLY FILEI	D:				
BUSINESS NAME:					
ADDRESS:					
ADDRESS: CITY:	STATE		ZIP		
Onondaga County, New York Date:	State, was filed in th	e Onondag	a County Clerk's	s Office on:	
Last Amended Date:	Muca I (ui	Index N	 Jumber		
**Is Hereby Amended an	d set forth the foll	ndex i	anges:		
BUSINESS ADDRESS:					
OWNERS NAME & ADDRESS:					
TYPE OF BUSINESS			PHONE #•		
THE OF BUSINESS			1110112 //		
I FURTHER CERTIFY and a Office and have found no busine I hold the County of Onondaga I	ss having the same or s narmless from any acti	similar name ion thereof.	e as aforementione	ed in this certif	icate and tha
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STATE OF NEW YORK					
COUNTY OF ONONDAGA					
On this day of	20, before m	ne personal	ly appeared		
personally known to me or proved to whose name(s) is (are) subscribed to executed the same in his/her/their ca the individual(s), or the person on b	the within instrument ar apacity(ies), and that by h	nd acknowled nis/her/their si	gment to me that heagnatures(s) on the in	/she/they nstrument,	
	(Signature and Off	fice of individ	ual taking acknowle	dgement)	