

State of North Carolina
County of _____

**CERTIFICATE OF ASSUMED NAME FOR A
CORPORATION**

1. The assumed name under which business will be conducted is:

2. The name and address of the corporation is:

IN WITNESS WHEREOF, this certificate by an officer of said corporation, this _____ day
of _____, 20 _____.

Signature of Corporation Officer

Title

State of North Carolina
County of _____

I _____, a Notary Public for said County and State, do hereby certify that _____ personally came before me this day and acknowledged that he is _____ of _____ and acknowledged, on behalf of _____, the due execution of the foregoing instrument.

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

(Official Seal)

Notary Public

My Commission Expires: _____, 20 ___