

# Business Certificate for Partners

The undersigned certify that they are conducting or transacting business as members of a partnership under the name or designation of \_\_\_\_\_

at \_\_\_\_\_ County of \_\_\_\_\_ State of New York.

and do further certify that the full names of all the persons conducting or transacting such partnership including the full names of all the partners with the residence address of each person, and the age of any who may be infants, are as follows:

*NAME Specify which are infants and state ages.*

*RESIDENCE*

_____	_____
_____	_____
_____	_____
_____	_____

We further certify that we are the successor in interest to \_\_\_\_\_  
the person or persons heretofore using such name or names to carry on or conduct or transact business.

*In Witness Whereof, We have signed this certificate on \_\_\_\_\_ 20\_\_*

_____	_____
_____	_____

State of New York, County of

ss.:

On \_\_\_\_\_ before me, the undersigned, personally appeared

personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
(signature and office of person taking acknowledgment)

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