Or	iginal	instrument	number:	

BUSINESS CERTIFICATE AMENDED

St. Lawrence County, State of New York

The undersigned hereby of designation of:	ertify that a certificate of condu	cting or transacting bu	siness under the name or
	(Town)		
	e office of the St. Lawrence Counter year in the office	•	w York on the day
•	ed that this amended certificate it ted in the original certificate or a facts:	• •	•
In witness whereof, I have signed this certificate.	e this day of	in the year	, made and
Name of owner(s)	Name of owner(s)	Name of owner(s)
Sign	Sign		Sign
Print	Print		Print
STATE OF NEW YORK COUNTY OF ST. LAWI			
On the day of undersigned, a Notary Pu	in the blic in and for said State, person		before me, the
whose name(s) is (are) su executed the same in his/		atisfactory evidence to nt and acknowledged to by his/her/their signatu individual(s) or the per	o me that he/she/they re(s) on the instrument,
	Notary Public's Sig	nature	