

FILE NO:

CERTIFICATE OF CO-PARTNERSHIP

THIS CERTIFIES THAT we, whose names are signed hereunder in full, are joined in co-partnership under the firm name of:

(Full name of firm and Street Address)
in the (City, Village or Township) of (Name of City, Village or Township), Clinton County, State of MI.

Table with 3 columns: NAME, STREET ADDRESS, CITY/STATE/ZIP CODE. Header: PRINT OR TYPE NAMES AND ADDRESSES OF CO-PARTNERS.

In Witness Whereof, we have this _____ day of _____, _____ made and signed this certificate.

SIGNATURES OF CO-PARTNERS

Signature lines for co-partners.

STATE OF MICHIGAN)
COUNTY OF CLINTON)

I, _____, one of the co-partners of said firm of _____ (Name of firm)

do hereby certify that all co-partners of said firm have herein above individually subscribed their respective names as witnessed by myself, and that the place of residence of each said co-partner as above written is true and correct.

Subscribed and Sworn to before me this _____ day of _____, _____

Notary Public, Clinton County, Michigan
My Commission Expires: _____

(This portion to be filled in only by the County Clerk)

DATE FILED _____ CLERK _____ CERTIFICATE EXPIRES _____

STATE OF MICHIGAN)
COUNTY OF CLINTON)

I, Diane Zuker, Clinton County Clerk and Clerk of the Circuit Court for said County, do hereby certify that I have compared the within copy of Certificate setting forth the full names of the persons owning, conducting or transacting business under the name of _____ together with the certificate of filing endorsed thereon, with the original Certificate heretofore filed and now remaining in my office, and that it is a true and correct copy thereof, and of the whole of such original Certificate and of said certificate of filing.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Court, on _____, 20_____

DIANE ZUKER, CLINTON COUNTY CLERK

BY _____ Deputy County Clerk