

Town of Portland

Town Clerk

P.O. Box 71
Portland, CT 06480
860-342-6743

Certificate of Adoption of Trade Name

To the Town Clerk of the Town of Portland, I/We, am/are conducting and transacting business in Portland under the full name (dba) of:

_____ and having a post office address of _____ and the full name of every person conducting or transacting said business together with the post office address of each said person is as follows:

(PLEASE PRINT)

NAME _____ **ADDRESS** _____

NAME _____ **ADDRESS** _____

NAME _____ **ADDRESS** _____

NAME _____ **ADDRESS** _____

SIGNATURES: _____

State of Connecticut)

) ss: *Portland*

Date: _____

County of Middlesex)

Personally appeared _____ Who subscribed and swore to the truth of the foregoing certificate, and acknowledged that (he, she, they) executed the same, before me.

*Town Clerk Assistant Town Clerk
Notary Public Justice of the Peace*