

INITIAL

CITY OF HARTFORD CERTIFICATE OF TRADE NAME

AMEND

Date:	
To the Town Clerk of the Town of Hartford	
I am/we are conducting and transacting business in said	d Town of Hartford under the full
name of:	
Address:	
Phone:	
Type of Business:	
	ng said business together with the address of each said person/s as
Name	Address
Signatures of named persons	
	.,
	,
	,
	.,
State of Connecticut	
County of Hartford ss: Hartford	
Personally appeared	
Who subscribe and sworn to the truth of the forgoing c	ertificate and acknowledge that
executed the same on behalf of said business before me	e.
	Notary Public
The above and foregoing is a true copy of the original	certificate filed in the Office of the Town Clerk of Hartford on
Attest:	
	File Number

Town and City Clerk/Assistant Town Clerk

^{*}Required by Section 35-1 of the Connecticut General Statutes