Tasha Sims
DeKalb County Clerk & Recorder
110 E. Sycamore Street ~ Sycamore, IL 60178
Phone: 815-895-7149

Assumed Name Registration

Illinois law requires sole proprietorships and general partnerships to register assumed names with the County Clerk in the county where the business is conducted or transacted. Corporations, limited liability companies, limited partnerships and limited liability partnerships must register with the Secretary of State. Professional service corporations with a true corporate name that does not include the name of one or more of the shareholders, or if the true corporate name continues to use the name of a deceased shareholder, the corporation must register the assumed name with the County Clerk of the county where the principal place of business is located.

Name of Business: _____

Nature of Business: _____

Address of Business: _____
(Business Street Address – City, State, Zip ~ List all addresses & attach additional registration form, if needed)

For home-based business confidential address request, attach court order or police report & provide explanation for the request here:

_____
(If requesting a confidential address, do not list address on this form & complete a Confidential Address Request form. If approved, address will not be published.)

True or real full names and addresses of all persons owning, conducting or transacting such business:

_____ _____ _____
Owner's Name – Printed Date Owner's Signature

_____
Owner's Home Street Address – City, State, Zip

_____ _____ _____
2nd Owner's Name – Printed Date 2nd Owner's Signature

_____
2nd Owner's Home Street Address – City, State, Zip

If additional space is needed, please attach additional registration form(s) and check this box: ☐

NOTE: The Assumed Name Publication Notice must be taken to a newspaper of general circulation published within DeKalb County and published once a week for 3 consecutive weeks. The first publication shall be within 15 days after this registration is filed and proof of publication shall be filed with the County Clerk within 50 days from the date of filing this registration.

State of Illinois} ss
County of DeKalb

I, _____, a Notary Public in and for the State of Illinois, County of DeKalb, do hereby certify that the person(s) whose names are subscribed to the foregoing instrument appeared before me this _____ day of _____, in the year of _____, and that said person(s) acknowledged that they have read and signed said instrument and that each of the statements contained herein are true.

(Notary Seal)

_____
Notary Public Signature

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(FOR OFFICE USE ONLY)

FILE NUMBER:_____ Received by:_____ Total # Pages_____

I hereby certify that all filing requirements have been met for the Certificate of Business Ownership as of this _____ day of _____, in the year of _____.

_____
Tasha Sims
DeKalb County Clerk & Recorder

Revised 2/21/2020