



Assumed Name Change of Address / Owner Name

Name of Business: _____

Owner Name Change (owner changes his/her name)

_____ TO _____
Owner's Name as Previously Registered (Print) Owner's New Name (Print)

Owner Residence Address Change

Owner's Name (Print)

Owner's Home Street Address as Previously Registered – Street, City, State, Zip

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

Business Address Change

Additional Business Location

Business Address as Previously Registered – Street, City, State, Zip

New Business Address – Street, City, State, Zip

**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 If approved, address will not be published.)

Owner Verification: _____
Owner's Name (Print) Owner's Signature Date

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

FILE NUMBER: _____ FILING FEE \$1.50 Received by: _____ PUBLICATION COMPLETED: Yes ___ N/A ___
(For office use only) (For office use only) (For office use only)