APPLICATION TO AMEND TRADE NAME REGISTRATION

Robert B. Evnen, Secretary of State P.O. Box 94608 Lincoln, NE 68509 www.sos.nebraska.gov

| Registered Trade Name: | |
|---|---|
| Please mark the changes this amendment makes t recent assignment or amendment to the application that apply). | 11 |
| Name of Owner | |
| · · | ity you must provide proof of name change such as a in another state or jurisdiction, a copy of a marriage ce decree, etc.) |
| Address of Owner | |
| Owner's New Address: Street Address | City State Zip |
| State of Incorporation or Organization of owner | |
| New State Name: | |
| | |
| | Signature of Owner/Authorized Representative |
| | Printed Name of Owner/Authorized Representative |

FILING FEE: \$30.00 Revised 07/01/2021