## BERRIEN COUNTY CLERK'S OFFICE Sharon J. Tyler

701 Main Street, St. Joseph, Michigan 49085 (269) 983-7111, Ext. 8233 www.berriencounty.org

## CERTIFICATE OF COPARTNERSHIP

(FILING FEE: \$10.00)

FOR OFFICE USE ONLY				
Certificate No				
Expiration Date:				

The	e undersigned, hereby certifies	that the following partnershi	p intends to engage in business in the County of Berrien, Sta	ate of Michigan, as stated below:
1.	This is an <b>Original</b>	(or) a <b>Renewal</b>	Certificate (check one).	
2. Name of Partnership: (please print)				
3.				
	•			
4.	Type or Kind of busines	SS:		
5.	Full legal names of all p	partners and resident a	address of each:	
	Name of Person		Residence Address (Street, City, State and Zip)	
6.	·		ntract):	
7.	Signatures of all persor	ns listed above:		
8.			, one of the partners of the above named ames and residence addresses and written their ful	
	or said illili have correcti	y stated then full legal in	arries and residence addresses and written their to	riegarnames.
		anature of one of the nar	tners listed above must be notarized if mailing in forn	2)
СТ		-	nd sworn to before me this day of	
		by all persons		, 20
				Personally Appeared
Printed name on Notary Public_			Notary	
			of Notary	
				County, Michigan
			expiration	
			ONLY - DO NOT WRITE BELOW THIS LINE	
=				
	JSINESS NAME:			
STATE OF MICHIGAN ) COUNTY OF BERRIEN )  I, Sharon J. Tyler, Clerk of Berrien County and the Circuit Court thereof, do hereby compared the within copy of Copartnership Certificate with the original record filed in same is a true and correct copy thereof and of the whole of such original certificate.				
		In Testimony Whereof,	I have hereunto set my hand and affixed the seal of s	said Circuit Court this
		day of		
		Sharon J. Tyler, Be	rrien County Clerk	
		Ву		Deputy County Clerk