

**CERTIFICATE OF TRADE NAME
INDIVIDUALS / SOLE PROPRIETORSHIP**

In the City County of Fairfax, I hereby certify in accordance with the provisions of §59.1-69 of the 1950 Code of Virginia as amended that I intend to conduct or transact business under the assumed or fictitious name of:

_____ (Name of Business)

at

_____,
(Street Address) (City) (State) (Zip Code)

_____ (Type of Business)

And that no other person has any interest of any kind in said business and that I am the sole owner and proprietor thereof.

My Post Office Address is: _____

My Residence address is: _____

I certify that the foregoing is true and correct to the best of my knowledge and belief. Given under my hand this _____ day of _____, 20_____.

(Signature)

Commonwealth of Virginia
County of _____, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that _____ whose name is signed to the foregoing and hereunto annexed Certificate dated the _____ day of _____, 20_____, has this day personally appeared before me and acknowledged the same before me in my office.

Deputy Clerk (Notary Public)

My Commission Expires: _____
My registration number is: _____ (VA notaries only)