



**CERTIFICATE OF  
SOLE PROPRIETORSHIP**

County of Macomb, Office of County Clerk  
\$10.00 Filing Fee – Expires 5 years from date of filing

D.B.A. File No. \_\_\_\_\_

Certificate Exp. \_\_\_\_\_

Certificate Filed \_\_\_\_\_

THE UNDERSIGNED hereby certifies, under the provisions of P.A. No. 101, P.A. of Mich. for the year 1907, as amended, that the following person now owns, carries on, conducts or transacts or intends to own, carry on, conduct, or transact, a business or maintain an office or place of business in the County of Macomb, State of Michigan, under the name, designation or style set forth below:

Name of Business \_\_\_\_\_

Street Address of Business \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Business Owner's Name \_\_\_\_\_

Home Address (No PO Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

SIGNATURE:

**\* MUST BE SIGNED BEFORE A NOTARY PUBLIC\***

STATE OF MICHIGAN  
COUNTY OF MACOMB

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Notary Public  
State of Michigan, County of Macomb  
My Commission expires: \_\_\_\_\_

NOTE: This Certificate must be renewed within five (5) years from date. If you change your place of business you must notify this office. If you change the personnel listed above, you must file Notice of Dissolution with this office. "Person" means one or more individual, partnerships, trusts, fiduciaries or other entities capable of contracting except corporations and limited partnerships.