

**CERTIFICATE OF BUSINESS OF A TRADE, ASSUMED, OR FICTITIOUS NAME  
PURSUANT TO SDCL 37-11-1**

The undersigned hereby certifies that I/WE will engage in, operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

\_\_\_\_\_;

That the address with zip code where the main office of such business is to be maintained is:

**PHYSICAL ADDRESS:** \_\_\_\_\_  
(NO PO BOXES)

**MAILING ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**OWNER INFORMATION:**

**NAME:** \_\_\_\_\_

**PHYSICAL ADDRESS:** \_\_\_\_\_  
(NO PO BOXES)

**MAILING ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**PHYSICAL ADDRESS:** \_\_\_\_\_  
(NO PO BOXES)

**MAILING ADDRESS:** \_\_\_\_\_

**SIGNATURES**

\_\_\_\_\_

STATE OF SOUTH DAKOTA        )  
  )  
County of \_\_\_\_\_  )

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

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**COST OF FILING: \$10.00 WHICH IS GOOD FOR 5 YEARS FROM THE DATE OF FILING AND THEN THIS FILING MUST BE RENEWED. (SDCL 37-11-1 & 7-9-15(3))**

**RENEWAL OF CERTIFICATE  
AS TO USE IN BUSINESS OF A TRADE, ASSUMED, OR FICTITIOUS NAME  
PURSUANT TO SDCL 37-11-1**

The undersigned hereby certifies that I/WE will engage in, operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

\_\_\_\_\_

That the address with zip code where the main office of such business is to be maintained is:

PHYSICAL ADDRESS: \_\_\_\_\_  
(NO PO BOXES)

MAILING ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**OWNER INFORMATION:**

NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_  
(NO PO BOXES)

MAILING ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_  
(NO PO BOXES)

MAILING ADDRESS: \_\_\_\_\_

**SIGNATURES**

\_\_\_\_\_

STATE OF SOUTH DAKOTA )

County of \_\_\_\_\_ )

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

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**COST OF FILING: \$10.00 WHICH IS GOOD FOR 5 YEARS FROM THE DATE OF FILING AND THEN THIS FILING MUST BE RENEWED. (SDCL 37-11-1 & 7-9-15(3))**

**TERMINATION OF BUSINESS  
TRADE, ASSUMED, OR FICTITIOUS NAME**

The undersigned hereby certifies that I/WE will no longer engage in, conduct, or operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

\_\_\_\_\_

Whose address is: \_\_\_\_\_

The name of each person authorized to do business under the above name is listed below, and same are hereby terminating their interest.

**OWNER INFORMATION:**

NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_  
(NO PO BOXES)

MAILING ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_  
(NO PO BOXES)

MAILING ADDRESS: \_\_\_\_\_

**SIGNATURES**

\_\_\_\_\_

STATE OF SOUTH DAKOTA        )

County of \_\_\_\_\_ )

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

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_