

Gizelle J. Meeks  
County Clerk/RMO  
[gmeeks@co.jefferson.ny.us](mailto:gmeeks@co.jefferson.ny.us)

Ashley L. Gascho  
Deputy County Clerk  
[agascho@co.jefferson.ny.us](mailto:agascho@co.jefferson.ny.us)

**Jefferson County Clerk's Office**  
**175 Arsenal Street**  
**Watertown, NY 13601**



**Mandy M. Clermont**  
DMV Deputy County Clerk  
315-785-3017

**Kimberly A. Hayden**  
Records Management Specialist  
315-785-5149

**Amended Certificate of Business**

**THE UNDERSIGNED DO HEREBY CERTIFY** that a certificate of doing business was filed in the office of the Jefferson County Clerk, under the name or designation and at the address of:

**Business Name:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

The original certificate of conducting business under an assumed name was filed on:

**Date and Instrument # of Original Filing:** \_\_\_\_\_

**Date and Instrument # of Last Amendment:** \_\_\_\_\_

**IT IS HEREBY CERTIFIED** that this amended certificate is made for the purpose of more accurately setting forth the facts recited in the original certificate or the last amended certificate and to set forth the following changes in such facts:

- ☐ Change the business address to: \_\_\_\_\_
- ☐ Original filer name changed to: \_\_\_\_\_
- ☐ Change residence address of filer to: \_\_\_\_\_
- ☐ Add/Remove Partner: \_\_\_\_\_  
(Partnerships ONLY, name and address)
- ☐ Other: \_\_\_\_\_

**DO NOT COMPLETE BELOW THIS LINE UNTIL IN THE PRESENCE OF A NOTARY**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

STATE OF NEW YORK  
COUNTY OF JEFFERSON

On this \_\_\_\_\_ day of \_\_\_\_\_, year \_\_\_\_\_, before me, the undersigned personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity and that by his/her/their signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

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

STATE OF NEW YORK  
COUNTY OF JEFFERSON

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