

Mail to: Secretary of State
Corporations Section
1560 Broadway, Suite 200
Denver, CO 80202
(303) 894-2251
Fax (303) 894-2242

For office use only 046

Please include a typed
self-addressed envelope

MUST BE TYPED
FILING FEE: \$10.00
MUST SUBMIT TWO COPIES

ASSUMED OR TRADE NAME CERTIFICATE OF MERGER

_____, a corporation organized under the
laws of _____ (Corporation Name),
transacting a portion of its business under an assumed or trade name
hereby certifies:

FIRST: The names of the merging corporations are: _____

SECOND: The name of the surviving corporation is _____

(Name as shown on file at the office of the Secretary of State)

THIRD: The location of the registered office is (Include City, State, Zip): _____

FOURTH: The date of the merger was _____ 19 _____

FIFTH: Trade name the surviving party will use is: _____

(as shown on file in the office of the Secretary of State)

If executed by a nonprofit corporation,
President/Vice-President and Secretary/Assistant _____
Secretary must sign. If executed by an LLC,
Manager or Member must sign. Signature _____
Corporate name
President
Secretary