



Prescribed by **J. Kenneth Blackwell**

Please obtain fee amount and mailing instructions from the **Forms Inventory List** (using the 3 digit form # located at the bottom of this form). To obtain the **Forms Inventory List** or for assistance, please call Customer Service:
Central Ohio: (614)-466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

RENEWAL OF TRADE NAME REPORT

1. The trade name to be renewed is: _____

2. Registration number: _____ Date of original registration: _____

3. The applicant is: (check appropriate box)

- an individual
- a General Partnership
- a Limited Partnership; registration no. _____
- limited liability company charter no. _____
- an Ohio corporation, charter no. _____
- a foreign corporation incorporated in the state of _____ holding Ohio license no. _____
- an unincorporated association
- other _____

4. The name of the applicant designated in item 3 is _____
NOTE: When the applicant is a partnership, the name of the partnership must appear on this line.

5. The business address of the user is:

(street address)

(city, township, or village) _____ (county) _____ (state) _____ (zip code)

NOTE: P.O. Box addresses are not acceptable.

6. Complete only if applicant is a partnership:

NAMES OF ALL GENERAL PARTNERS

COMPLETE RESIDENCE ADDRESSES (including zip code)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

This document is signed by a corporate officer, general partner, association member or officer, or the individual applicant.

Signature: _____

Name: _____