

BERRIEN COUNTY CLERK'S OFFICE

M. Louise Stine

701 Main Street, St. Joseph, Michigan 49085

(269) 983-7111, ext. 8233

www.berriencounty.org

FOR OFFICE USE ONLY

Certificate No. _____

Expiration Date: _____

Certificate of Copartnership

(Filing Fee: \$10.00)

The undersigned, hereby certifies that we joined in copartnership in the County of Berrien, State of Michigan, under the firm name as stated below.

1. This is an **Original** _____ (or) a **Renewal** _____ Certificate (check one).
2. Name of Firm: (please print) _____
3. Address of Firm: _____
 City, State, Zip: _____
 Telephone: (_____) _____
 Mailing Address: (if different) _____
4. Full legal names of copartners and resident address of each:

Name of Person	Residence Address (Street, City, State and Zip)
_____	_____
_____	_____
_____	_____
_____	_____
5. Expiration date of copartnership contract: _____
6. Signatures of all persons listed above:

7. I, _____, one of the copartners of the above named firm, certify that all copartners of said firm have correctly stated their full legal names and residence addresses and written their full legal names.

(Signature of one of the copartners listed above)

STATE OF MICHIGAN)
COUNTY OF BERRIEN)

Subscribed and sworn to before me this _____ day of _____, 20____
by all persons listed above.

_____ Personally Appeared

Signature of Notary _____

Printed name of Notary _____

Notary Public _____ County, Michigan

Commission expiration _____

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

BUSINESS NAME: _____

STATE OF MICHIGAN)
COUNTY OF BERRIEN)

I, M. Louise Stine, Clerk of Berrien County and the Circuit Court thereof, do hereby certify that I have compared the within copy of Copartnership Certificate with the original record filed in my office, and the same is a true and correct copy thereof and of the whole of such original certificate.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of said Circuit Court this
_____ day of _____, 20____.

M. Louise Stine, Berrien County Clerk

By _____ Deputy County Clerk