Form NFP 104.15/20 (Rev. Jan. 2003) Secretary of State Jesse White Department of Business Services 501 S. Second St., Rm. 350 Springfield, IL 62756 217-782-9520 www.cyberdriveillinois.com Remit payment in the form of a check or money order payable to Secretary of State.	Application to Adopt, Change or Cancel an Assumed Corporate Name Under the General Not for Profit, Corporation Act This space for use by Secretary of State.	FILE #: SUBMIT IN DUPLICATE This space for use by Secretary of State. Date: Filing Fee: \$ (See Note Below) Approved:
1. Corporate Name:		
2. State or Country of Incorporation	on:	
3. Date Incorporated (if an Illinois	corporation) or Date Authorized to Transact Busine	ess in Illinois (if a foreign corporation):
Month & Day	, Year	
·		
Complete No. 4 and No. 5 if adopting or changing an assumed corporate name.		
4. Corporation intends to adopt a	nd to transact business under the Assumed Corpo	rate Name of:
5. The right to use the Assumed Corporate Name shall be effective from the date this application is filed by the Secretary		
of Otate until the first day of the correction's environment		
of State until,, the first day of the corporation's anniversary Month & Day Year		
month in the next year evenly o	livisible by five.	
Complete	No. 6 if changing or cancelling an assumed cor	porate name.
6. Corporation intends to cease to	ansacting business under the Assumed Corporate	Name of:
penalties of perjury, that the fac	as caused this statement to be signed by a duly cts stated herein are true and correct.	authorized officer who affirms, under
Dated Month & Day	Year Exac	Name of Corporation
Any Authorized Of	ficer's Signature	
Name and Title	(type or print)	
rent year ends with a 1 8; or \$30 if the current y	n assumed corporate name is \$150 if the current ye or 6; \$90 if the current year ends with a 2 or 7; \$6 year ends with a 4 or 9. n assumed corporate name is \$5.	

• The fee to change an assumed corporate name is \$25.