

Town of East Granby Office of the Town Clerk 9 Center Street East Granby, CT 06026 (860) 653-6528

\$10.00 FILING FEE

	TATE OF ADOD	TION OF '		
[I am / We are] conducting and			TRADE NAME	
0	C			iuei tile
FULL NAME (DBA) OF:				
TYPE OF BUSINESS:				
BUSINESS ADDRESS:				
TOWN, STATE, ZIP:		BUSIN	NESS PHONE:	
The full name of every person each of said persons is as follow	e	ing said busin	ess, together with the full	address of
each of said persons is as follow <u>PLEASE PRINT:</u>	vs:	C		
each of said persons is as follow <u>PLEASE PRINT:</u> Name	vs:Home Ad	dress		
each of said persons is as follow <u>PLEASE PRINT:</u> Name	vs:Home Ad	dress		
each of said persons is as follow <u>PLEASE PRINT:</u> Name Town	vs: Home Ad State	dress Zip	Home Phone	
each of said persons is as follov <u>PLEASE PRINT:</u> Name Town Name	vs: Home Ad State Home Ad	dress Zip dress	Home Phone	
each of said persons is as follow	vs: Home Ad State Home Ad State	dress Zip dress Zip	Home Phone Home Phone	

State of Connecticut)					
State of Connecticut	2					
	SS:					
County of Hartford)					
Personally appeared _			,			
	, who subscribed and swore to the truth of the foregoing					

Town Clerk Justice of the Peace Notary Public Commissioner of Superior Court