

APPLICATION TO AMEND TRADE NAME REGISTRATION

John A. Gale, Secretary of State
Room 1301 State Capitol, P.O. Box 94608
Lincoln, NE 68509
(402) 471-4079
<http://www.sos.ne.gov>
Submit in Duplicate

Registered Trade Name: _____

Please mark the changes this amendment makes to the application for registration or the most recent assignment or amendment to the application and provide the new information (mark all that apply).

____ Name of Owner
Owner's New Name: _____
(If other than a Nebraska entity you must provide proof of name change such as a copy of an amendment filed in another state or jurisdiction, a copy of a marriage license, or a copy of a divorce decree, etc.)

____ Address of Owner
Owner's New Address: _____
Street Address City State Zip

____ State of Incorporation or Organization of owner
New State Name: _____

Signature of Owner