

PROCEDURE FOR FILING FICTITIOUS NAME CERTIFICATE

1. This certificate is being filed in accordance with Title 6 Del. C. Chapter 31. The applicant must bear primary responsibility for determining whether there is in existence any other business or organization utilizing the same fictitious name. The acceptance and recording of a fictitious name certificate in the Prothonotary's Office shall in no way be deemed a warranty of the applicant's right to operate under the name registered.
2. Make sure the form is complete and the information is accurate.
3. After the form is completed, please return it to the cashier for processing. If you are returning it by mail, be sure that it is notarized. Please enclose a stamped, self-addressed envelope so that we may send you a certified copy as proof of filing for your records. To register in New Castle County, mail the completed form to:

New Castle County Prothonotary
500 N. King Street
Suite 500, Lower Level 1
Wilmington, DE 19801-3746

4. The filing fee is \$25.00. Your check or money order should be made payable to the "Prothonotary".
5. If you sell, change the name, or in any other way change the status of the business, you should notify this office.
6. The filing of the document covers only New Castle County. Pursuant to Title 6 Del. C. Chapter 31, § 3101 and § 3103, if you are going to do business in Kent or Sussex County, you will need to register with the respective Prothonotary's Office in each county.

Kent County Prothonotary
38 The Green
Dover, DE 19901
(302) 739-3184

Sussex County Prothonotary
1 The Circle, Suite 2
Georgetown, DE 19947
(302) 856-5742

7. This registration of a Trade (fictitious) name with this office has no connection with the need for a license to do business in Delaware. Applications for a Delaware Business License are available at the Division of Revenue, State of Delaware, Carvel State Building, 8th & French Streets, Wilmington, DE 19801 (302) 577-5800.

NEW CASTLE COUNTY
 REGISTRATION OF TRADE NAMES
 PARTNERSHIPS & ASSOCIATIONS

TRADE NAME: _____

Business Address: _____

_____ Phone Number _____

Title of Person, Firm or Association(Parent Company, if applicable) :

Names and addresses of all owners, members, or partners comprising the firm:

Last Name	First Name	Address

Date of Formation: _____

Nature of Business: _____

STATE OF DELAWARE
 NEW CASTLE COUNTY

BEFORE ME, the Subscriber, a Notary Public of the State of Delaware, personally appeared _____, a principal in the business described in the foregoing Certificate, who, having first been sworn by me according to law did depose and say as follows:

1. He/She is a principal in the business described in the foregoing certificate.
2. That the foregoing information provided in the foregoing certificate is true, correct, and complete.

 Affiant

Title: _____

SWORN AND SUBSCRIBED this _____ day of _____, _____.

 Notary Public