

**If a Corporation:**

ATTEST:

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
Name, Secretary

BY: \_\_\_\_\_  
Name, Title

**If a Limited Liability Company:**

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
Name, Secretary

BY: \_\_\_\_\_  
Name, Title

**If a Partnership:**

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Authorized Partner

**PLEASE LIST THE NAMED PRINCIPALS OF YOUR BUSINESS:**