

**CERTIFICATE OF FICTITIOUS NAME OF**

\_\_\_\_\_  
( Name of Business )

Know all men by these present that:

\_\_\_\_\_ and  
( Print Name of Partner )

\_\_\_\_\_  
( Print Name of Partner )

are associated as partners in the business of ownership and management of:

\_\_\_\_\_ Under the firm name of \_\_\_\_\_  
( Type of Business ) ( Name of Business )

that is located at: \_\_\_\_\_  
( Address of Business )

That partnership is a General Partnership, dating from the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

That all partners reside in Grant County and that there are no other partners in said partnership.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Partner

\_\_\_\_\_  
Signature of Partner

State of Oklahoma  
County of Grant

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

By \_\_\_\_\_ and \_\_\_\_\_  
Individually Individually

My Commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public