



2018014173 00106

FORSYTH CO, NC FEE \$26.00
PRESENTED & RECORDED

04-19-2018 01:34:39 PM

LYNNE JOHNSON

REGISTER OF DEEDS

BY: SYLVIA TILLEY

DPT

BK: RE 3400

PG: 950-950

Original To: Owner**ASSUMED BUSINESS NAME CERTIFICATE (NCGS §66-71.5)**

Please print legibly.

1. The assumed business name is:

U Nique Basketz By Design

(You may include no more than five (5) assumed business names on this form.)

2. The real name of the person or entity engaging in business under the assumed business name is:

Monique R. Chavis(Corporations, LLC's, limited partnerships must provide the exact name registered with the NC Secretary of State's office and the SOSID number assigned at the time of formation. Go to www.sosnc.gov/br/search to look up your information.)

3. The nature/type of the business is: _____

4. The street address of the principal place of business is: (PO Boxes are not acceptable)

3181 Hickory Ridge Dr. WIS NC 27127

5. The mailing address, if different from the street address, is:

Same as above

6. The counties where the assumed business name will be used to engage in business are:

☒ All 100 North Carolina countiesThis certificate is signed by the owner/legal representative of the person or entity named above,
this 19 day of April, 2018.Signature: Monique ChavisPrinted/Typed Name: Monique ChavisTitle: Owner

(See instructions for who must sign for various business entity types.)