



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
District of Columbia Government

Corporations Division

TN-1 Trade Name Registration Form. Version 2, July 2010.

Use this form to register your trade name. If entity (exception - sole-proprietor) will own the trade name, said entity must be in good standing before filing this form.

ENTITY TYPE	FILING FEE
All entities; Initial Trade Name Registration.	Refer to Corporate Fee Schedule posted online;

Pursuant to the provisions of the Code of Laws for the District of Columbia and the OMNIBUS REGULATORY REFORM ACT OF 1998, the undersigned company, partnership or individual hereby applies for a Certificate of Trade Name and for that purpose submits the following statement:

1. Name of Individual or Entity, using the trade name: _____	2. Business phone number / Email: _____
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3. Proposed Trade Name: (Prohibited words - The true and real name of persons conducting the business, the words "corporation," "incorporated," "partnership", "limited", or any variation. Sexually explicit words or terms are also forbidden)

4. Type of Entity:

<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Other: Please, specify _____		

5. FEIN number: _____	6. Full legal name of person submitting this form: _____
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7. Complete Business Address:

**Questions 8 & 9 intended only for corporations, partnerships and limited liability companies.
Question 9 intended only for sole-proprietors, located outside the District of Columbia.**

8. Name and street address of authorized official (business owner for sole-proprietors):

TITLE	NAME	ADDRESS
_____	_____	_____

9. Name and address of registered agent in the District of Columbia:

10. Select individual executing this form: <input type="checkbox"/> Business Owner (for sole-proprietors) <input type="checkbox"/> Authorized Person (for other entity types)	11. Signature: _____
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If you sign this application, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405.

For Office Use Only	Trade Name Registration Number Corporate File Number	_____
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Mail all forms and required payment to: Department of Consumer and Regulatory Affairs Corporations Division PO Box 92300 Washington, DC 20090 Phone: (202) 442-4400	_____
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Please check dcra.dc.gov to view organizations required to register, to search business names, to get step-by-step guidelines to register an organization, to search registered organizations, and to download forms and documents. Just click on "Corporate Registrations."



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
District of Columbia Government
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TN-2 Trade Name Renewal Form
Version 2, July 2010.

Use this form to renew your existing trade name. If entity (exception - sole-proprietor) owns the trade name, said entity must be in good standing before filing this form.

ENTITY TYPE	FILING FEE
All entities; Trade Name Renewal	Refer to Corporate Fee Schedule posted online;

Pursuant to the provisions of the Code of Laws for the District of Columbia and the OMNIBUS REGULATORY REFORM ACT OF 1998, the undersigned company, partnership or individual hereby applies for Trade Name Renewal and for that purpose submits the following statement:

1. Name of Individual or Entity, using the trade name: _____		2. Business phone number / Email: _____	
3. Existing Trade Name: (give registration # if known) _____			
4. Trade Name Expiration Date: _____			
5. Complete Business Address: _____			
6. Name and address of authorized individual executing this form: _____			
7. Select individual executing this form: <input type="checkbox"/> Business Owner (for sole-proprietors) <input type="checkbox"/> Authorized Person (for other entity types)		8. Signature: _____	

If you sign this application, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405.

For Office Use Only	Trade Name Registration Number Corporate File Number	_____
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DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
District of Columbia Government
Corporations Division

TN-3 Trade Name Cancellation Form
Version 2, July 2010.

Use this form to cancel your trade name.

ENTITY TYPE

All entities; Trade Name Cancellation

FILING FEE

Refer to Corporate Fee Schedule posted online;

Pursuant to the provisions of the Code of Laws for the District of Columbia and the OMNIBUS REGULATORY REFORM ACT OF 1998, the undersigned company, partnership or individual hereby applies for Trade Name Cancellation and for that purpose submits the following statement:

1. Name of Individual or Entity, using the trade name: _____ 2. Business phone number / Email: _____

3. Existing Trade Name: (give registration # if known)

4. Date filed

5. Date of cancellation:

6. Name and address of authorized individual executing this form:

7. Select individual executing this form:

- Business Owner (for sole-proprietors)
 Authorized Person (for other entity types)

8. Signature:

If you sign this application, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405.

For Office Use Only

Trade Name Registration Number
Corporate File Number

Mail all forms and required payment to:
Department of Consumer and Regulatory Affairs
Corporations Division
PO Box 92300
Washington, DC 20090
Phone: (202) 442-4400

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DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
District of Columbia Government
Corporations Division

TN-4 Trade Name Amendment Form
Version 2, July 2010.

Use this form to amend the following information on your trade name: change of ownership (new owner must be registered and in good Standing) or change of address for existing trade name owner (sole-proprietors only).

ENTITY TYPE	FILING FEE
All entities; Trade Name Amendment: Change of Ownership	Refer to Corporate Fee Schedule posted online;
All entities; Trade Name Amendment: Change of Address	Refer to Corporate Fee Schedule posted online;

1. Name of Individual or Entity, using the trade name: _____	2. Business phone number / Email: _____
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3. Select type of amendment:

Change of Ownership Change of Address

4. Existing Trade Name: (give registration # if known)

5. Date filed _____	6. Date of cancellation: _____
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7. The following amendment is made to the initial application for registration:

8. Name and address of authorized individual executing this form:

9. Select individual executing this form: <input type="checkbox"/> Business Owner (for sole-proprietors) <input type="checkbox"/> Authorized Person (for other entity types)	10. Signature: _____
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If you sign this application, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOG § 22-2405.

For Office Use Only	Trade Name Registration Number Corporate File Number	
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