## Office of the Minnesota Secretary of State

**Certificate of Assumed Name** 

Minnesota Statutes, Chapter 333

The filing of an assumed name does not provide a user with exclusive rights to that name. The filing is required for consumer protection in order to enable customers to be able to identify the true owner of a business.



ASSUMED NAME: ADAM SEAN TEMPEST

PRINCIPAL PLACE OF BUSINESS: c/o 1630 West Freedom St Greensburg IN [47240]USA United States of America

NAMEHOLDER(S):

Name: Address:

Tempest, Adam Sean c/o 1630 W Freedom St Greensburg Indiana

[47240]USA United States of America

If you submit an attachment, it will be incorporated into this document. If the attachment conflicts with the information specifically set forth in this document, this document supersedes the data referenced in the attachment.

By typing my name, I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

**SIGNED BY: Adam Tempest** 

MAILING ADDRESS: c/o 1630 West Freedom St Greensburg IN [47240]USA

EMAIL FOR OFFICIAL NOTICES: atempest21@gmail.com



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OFFICE OF THE SECRETARY OF STATE
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Steve Simon Secretary of State

Oteve Vimm