

State of Maryland
Department of Assessments and Taxation
Charter Division

TRADE NAME AMENDMENT APPLICATION

FILING FEE: **\$25.00**

EXPEDITED SERVICE FEE IS AN ADDITIONAL **\$50.00**

(MAKE CHECKS PAYABLE TO DEPARTMENT OF ASSESSMENTS AND TAXATION)

TRADE NAME: Humanitarian organization for de development of Lagonave's Island

(LIST TRADE NAME EXACTLY AS FILED ON THE ORIGINAL APPLICATION)

(ATTACH AN ADDITIONAL SHEET FOR ADDITIONAL INFORMATION AS NEEDED)

OWNERS NAME:

REBIRTH

☒ CHANGING NAME

☐ ADDING NAME

☐ DELETING NAME

OWNERS ADDRESS:

TO: **423 Decatur Ave**

Salisbury, MD 21804

☐ CHANGING ADDRESS

☐ ADDING ADDRESS

☐ DELETING ADDRESS

ADDRESS WHERE NAME IS USED:

TO: **423 Decatur Ave**

Salisbury, MD 21804

☐ CHANGING ADDRESS

☐ ADDING ADDRESS

☐ DELETING ADDRESS

CHANGING DESCRIPTION OF BUSINESS:

**No change, Business Remains the Same, A Charitable and support
Organization**

**** PLEASE NOTE: WHEN CHANGING OWNERS ADDRESS OR ADDRESS WHERE NAME IS USED, THE NEW ADDRESS MUST CONTAIN A FULL STREET ADDRESS INCLUDING CITY, STATE AND ZIP CODE. IF THIS INFORMATION IS NOT LISTED, THIS APPLICATION WILL BE REJECTED.**

SIGNATURE OF CURRENT OWNER ON FILE

SIGNATURE OF OWNER

(AUTHORIZED TITLE)

SIGNATURE OF OWNER

(AUTHORIZED TITLE)

SIGNATURE OF OWNER

(AUTHORIZED TITLE)