

State of Maine  
CITY OF PORTLAND


CERTIFICATE OF SOLE PROPRIETOR ADOPTING A NAME OTHER THAN OWN  
(Title 31 M. R. S. A. Section 2)

The undersigned hereby certifies that (s)he intends to engage in the  
Preschool - Family Home Child Care business, as sole proprietor thereof, and to  
(type of business)

adopt the name, style or designation of Roots-n-Shoots Preschool  
(name of business)

in the conduct of said business.

Lynn Rutter  
Printed Name of Proprietor

  
Signature of Proprietor (signature must be witnessed by  
a Notary Public or attorney)

161 Clinton St  
Home Address  
Zip Code 04103

same, Portland, ME  
Business Location Address (cannot be a PO Box)  
(MUST be in Portland) Zip Code \_\_\_\_\_

603-479-1731  
Home (or Cell) Phone Number

207-541-4266  
Business Phone Number

Lynn.Rutter321@gmail.com  
Email

www.facebook  
Business Website

**BELOW INFORMATION MUST BE COMPLETED BY A NOTARY PUBLIC OR ATTORNEY**


STATE OF MAINE

Cumberland County, SS.

6/20 A.D. 2013

Then Lynn Rutter, personally appeared and made oath  
to the foregoing certificate that the same is true.

Before me,

  
\_\_\_\_\_  
Attorney or Notary Public (Commission Expires Bar # 2774)

Note: This certificate shall be deposited in the City of Portland Office of the Clerk in which the business is to be carried on. The City Clerk's Office is entitled to a fee of TEN dollars (\$10.00) for recording this certificate.