

JAMES C. KIRKPATRICK STATE INFORMATION CENTER

## JOHN R. ASHCROFT SECRETARY OF STATE STATE OF MISSOURI

CORPORATIONS (866) 223-6535

## INSTRUCTIONS FOR CERTIFICATE OF CHANGE OF OWNER'S NAME FOR TRADEMARK/SERVICE MARK

- 1. Provide the name and address of the person or business entity who originally registered the mark.
- 2. Provide the Missouri Registration Number from the Certificate of Registration and the original date of registration.
- 3. Provide the new name of the registrant (individual or business entity).
- 4. The form is to be signed by the officer or authorized party of the registrant.
- 5. The change of name form is to be notarized. The notary public is to sign the form and also include their embossed or rubber stamp seal on the document. Any additional notary information required by state law is also to be completed by the notary public.
- 6. The fee for a change of name of a trademark/service mark is \$55. All checks or money orders should be made payable to the Director of Revenue.
- 7. Send a separate form and check for each change of name application or mark.
- 8. A certificate will be issued in the new name of the officer or authorized party of the registrant for the remainder of the term of registration. It will be mailed to the officer or authorized party unless otherwise specified.
- 9. Completed change of name forms and fee should be returned to the Secretary of State's Office, Corporations, PO Box 778, Jefferson City, MO 65102-0778.
- 10. If you have any questions regarding the completion of this form, please call our office at (866) 223-6535.

TMSM 40A (06/2012)



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## State of Missouri John R. Ashcroft, Secretary of State

Corporations Section PO Box 778 / 600 W. Main St., Rm. 322 Jefferson City, MO 65102-0778 Toll-Free (866) 223-6535

## Certificate of Change of Owner's Name For Trademarks and Service Marks

This is to certify that	Original Name of Registrant)
(O	riginal Name of Registrant)
of	(Address)
has changed its name and that its use of right to and i	nterest in the mark which is registered in the State of Missouri, Registration
No, dated, shall hereafter	be in the name of(New Name of Registrant)
for the remainder of the term of the registration or of the	
	dges and represents that it has filed all filings and/or amendments with the enced name change, and agrees that this change of name does not serve as or owner.
	(Signature of officer or authorized party of the registrant)
	(Title)
State of	
County of	(Date)
	efore me personally appeared, where we personally appeared, where we have a signed it as a free act on his/her own behalf (or on behalf authority to do so).  (Signature of Notary Public)
	Typed or printed name State of
Return completed form to: Corporations Section PO Box 778 Jefferson City, MO 65102-0778	Commissioned forCounty
	My Commission Expires
	Commission #