



Date: _____

Business Entity Name Change Application

✓ # Checklist
1 Name Change Application
2 Copy of Amendment filed with the domicile Secretary of State
3 Copy of Amendment filed with Idaho Secretary of State
4 List of Officers (new officers should submit NAIC Biographical Affidavit)

Idaho License Number: _____ FEIN: _____

Former Business Name: _____

New Business Name: _____

Business Location Information

Address: _____

Phone: _____ **Fax:** _____

E-mail: _____

Toll Free: _____ **Contact Name:** _____

Mailing Information

Address: _____

Phone: _____ **Fax:** _____

The undersigned owner, partner, officer or director of the applicant hereby certifies, under penalty of perjury, that all of the information submitted in this application and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration revocation and may subject me and the applicant to civil or criminal penalties.

I understand that this application is for business entity name changes that do not involve a change of FEIN or a complete-filing for change in entity structure.

Signature _____
Date

Printed Name _____
Title