

SOUTH DAKOTA CODIFIED LAW CHAPTER 37-11:

SDCL 37-11-1. Filing of fictitious name statement required—Exceptions—Violation as misdemeanor. Any person engaging in or conducting a business for profit in this state shall file a fictitious name statement unless one of the following apply:

1. (1) The name of the business plainly shows the true surname of each person interested in the business; or
2. (2) The name of the business is on file with the secretary of state in a required business filing.

Failure to file a required fictitious name statement is a Class 2 misdemeanor. The fictitious name statement shall include the name, post office address, and residence address of each person interested in the business and the address where the main office of the business is to be maintained. The fictitious name statement shall be electronically filed with the secretary of state, or filed in paper form with any register of deeds in the state. The filing shall be renewed every fifth year thereafter. A fee of ten dollars shall be paid with each new filing and renewal. The fee shall be retained by the filing office receiving the filing.

FILE A BUSINESS NAME WITH REGISTER OF DEEDS:

To file a Business name with the Register of Deeds, you can either obtain a form from the Register of Deeds or download the form from this website and have all parties that own the business sign the form in front of A NOTARY PUBLIC. THIS IS A VERIFIED STATEMENT AND, THEREFORE, IT NEEDS TO BE SIGNED TWICE BY EACH OWNER. You must file the document in the County you are doing business in. The fee for filing a Business Name is \$10.00 and they are good for 5 years and then would need to be renewed. NO NOTICE WILL BE SENT TO YOU FOR RENEWAL. You may pay \$1.00 per page for a copy of the filed document to be mailed to you after processing is complete. Filing of a Business Name is required by law, however, it is NOT A TRADENAME.

FILE A BUSINESS NAME WITH SECRETARY OF STATE:

A Business Name can be filed directly with the Secretary of State on line at <https://sdsos.gov/>

PREPARED BY:

NAME OF PERSON PREPARING DOCUMENT

ADDRESS OF PERSON PREPARING DOCUMENT

PHONE NUMBER OF PERSON PREPARING DOCUMENT

CERTIFICATE AS TO USE IN A BUSINESS OF TRADE, ASSUMED OR FICTICIOUS NAME

The undersigned hereby certify/ies that he/she/they will engage in, conduct, or operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

FILL IN THE NAME OF THE BUSINESS ON THE ABOVE LINE.

That the address where the main office of such business is to be maintained is:

FILL IN MAIN OFFICE ADDRESS ON ABOVE LINE.

That the name, mailing and residence address of each person owning or having interest in said business are as follows:

<i>Name</i>	<i>Mailing/Physical Address</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Provide an email address for future notifications: _____

Signing below verifies that he/she/they have read the foregoing certificate and know the contents thereof and that the same is true.

_____	_____
_____	_____
_____	_____

ALL OWNERS/INTERESTED PARTIES MUST SIGN IN PRESENCE OF NOTARY PUBLIC

STATE OF _____
COUNTY OF _____

_____	_____
_____	_____
_____	_____

Subscribed and sworn to before me this _____ day of _____, 20_____.

SEAL

NOTARY PUBLIC

Commission expires: _____

PREPARED BY:

NAME OF PERSON PREPARING DOCUMENT

ADDRESS OF PERSON PREPARING DOCUMENT

PHONE NUMBER OF PERSON PREPARING DOCUMENT

TERMINATION OF BUSINESS OF TRADE, ASSUMED OR FICTICIOUS NAME

The undersigned hereby certify/ies that he/she/they will no longer engage in, conduct, or operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

FILL IN THE NAME OF THE BUSINESS ON THE ABOVE LINE.

And whose address is:

FILL IN MAIN OFFICE ADDRESS ON ABOVE LINE.

That the name of each person authorized to do business under the above name is listed below, and the same are hereby terminating their interest:

<i>Name</i>	<i>Mailing/Physical Address</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signing below verifies that he/she/they have read the foregoing certificate and know the contents thereof and that the same is true.

_____	_____
_____	_____
_____	_____

ALL OWNERS/INTERESTED PARTIES MUST SIGN IN PRESENCE OF NOTARY PUBLIC

STATE OF _____

COUNTY OF _____

_____	_____
_____	_____
_____	_____

Subscribed and sworn to before me this _____ day of _____, 20_____.

SEAL

NOTARY PUBLIC

Commission expires: _____

PREPARED BY:

NAME OF PERSON PREPARING DOCUMENT

ADDRESS OF PERSON PREPARING DOCUMENT

PHONE NUMBER OF PERSON PREPARING DOCUMENT

RENEWAL OF CERTIFICATE AS TO USE IN A BUSINESS OF TRADE, ASSUMED OR FICTICIOUS NAME

The undersigned hereby certify/ies that he/she/they will continue to engage in, conduct, or operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

FILL IN THE NAME OF THE BUSINESS ON THE ABOVE LINE.

That the address where the main office of such business is to be maintained is:

FILL IN MAIN OFFICE ADDRESS ON ABOVE LINE.

That the name, mailing and residence address of each person owning or having interest in said business are as follows:

<i>Name</i>	<i>Mailing/Physical Address</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Provide an email address for future notifications: _____

Signing below verifies that he/she/they have read the foregoing certificate and know the contents thereof and that the same is true.

_____	_____
_____	_____
_____	_____

ALL OWNERS/INTERESTED PARTIES MUST SIGN IN PRESENCE OF NOTARY PUBLIC

STATE OF _____
COUNTY OF _____

_____	_____
_____	_____
_____	_____

Subscribed and sworn to before me this _____ day of _____, 20_____.

SEAL

NOTARY PUBLIC

Commission expires: _____

PREPARED BY:

NAME OF PERSON PREPARING DOCUMENT

ADDRESS OF PERSON PREPARING DOCUMENT

PHONE NUMBER OF PERSON PREPARING DOCUMENT

AMENDMENT TO CERTIFICATE AS TO USE IN A BUSINESS OF TRADE, ASSUMED OR FICTICIOUS NAME

The undersigned hereby certify/ies that he/she/they will constitute a change to operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

FILL IN THE NAME OF THE BUSINESS ON THE ABOVE LINE.

The change being as follows:

That the name, mailing and residence address of each person owning or having interest in said business are as follows:

<i>Name</i>	<i>Mailing/Physical Address</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Provide an email address for future notifications: _____

Signing below verifies that he/she/they have read the foregoing certificate and know the contents thereof and that the same is true.

_____	_____
_____	_____
_____	_____

ALL OWNERS/INTERESTED PARTIES MUST SIGN IN PRESENCE OF NOTARY PUBLIC

STATE OF _____

COUNTY OF _____

_____	_____
_____	_____
_____	_____

Subscribed and sworn to before me this _____ day of _____, 20____.

SEAL

NOTARY PUBLIC

Commission expires: _____