

ENTERPRISE ZONE PROGRAM
Contract Amendment
Change in Name

I, _____, of _____,
Name and Title Business Name

request a Name Change only for Enterprise Zone Contract # _____.

From: _____
Prior Business Name Louisiana Dept of Revenue number

To: _____
New Business Name Louisiana Dept of Revenue number

If applicable, please provide the following information for LLC or Sub-S corporation members:

Name	Social Security or Louisiana Dept of Revenue Number
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Date Official's Signature Official's Printed/Typed Name and Title

Approved on _____, 20 _____ By: _____
Board of Commerce and Industry

Kristy G. McKearn
Board of Commerce and Industry Typed Name

Return **3 originals** to: Louisiana Economic Development
Business Incentive Services
P O Box 94185
Baton Rouge, Louisiana 70804-9185