

# Change business name



Use this form to change the organization name on a business account. Enter your information clearly using blue or black ink.

## 1. Business information

This form may be used to change a business name only when (1) all authorized signers remain the same and (2) the Tax Identification Number remains the same. If you need to make other changes to your business account, please contact our Business Banking Team at 1.866.371.3831, opt 5. All sections of this form must be completed in addition to providing any required documentation before we can make this change.

Business account number(s)

Tax ID Number

## 2. Change the business name on your account

Business name currently on account

New business name on account

Name of authorized signer requesting change

Authorized signer security code **(Required)**

## 3. Required documents for name change

### Needed for all accounts

- Letter from business explaining situation and reason for name change
- Documentation the ITIN has been reassigned with the IRS
- Documentation of the notification sent to state and/or local government of the name change
- Documentation of what was used to amend originating paperwork [\(See list below for your business type\)](#)

### Additional required documents

- Control Person and Beneficial Equity Owner Certification form
- Business signature card

### Needed based on entity type

#### Corporation

- Articles of Incorporation
- Verification of the current Officers from the most recent filing with the Secretary of State or executed meeting minutes with Officers stated

#### Limited Liability Company

- Articles of Organization
- Operating Agreement; only pages that contain the following:
  - Name of business
  - Whether LLC is member managed or manager managed and powers/authority that members or manager possess
  - Name of members
  - Establishment of LLC/date
  - Signature page
  - State of organization
  - Ownership percentages, if available

If not stated in the pages of the Operating Agreement or amendment(s) provided:

- Verification of the current Manager(s) or Officers from the most recent filing with the Secretary of State or executed meeting minutes with the Manager(s) or Officers stated

<b>Partnership (General, Limited, or Limited Liability Partnership)</b>	<ul style="list-style-type: none"> <li>• Partnership Agreement; only pages that contain the following: <ul style="list-style-type: none"> <li>– Name of the business</li> <li>– Name of partners</li> <li>– Establishment of the partnership/date</li> <li>– Signature page</li> <li>– State</li> <li>– Ownership percentages, if available</li> </ul> </li> <li>• Certificate of Formation from the State</li> </ul> <p>If not stated in the limited partnership agreement or amendment(s) provided:</p> <ul style="list-style-type: none"> <li>• Verification of the current General Partner from most recent filing with the Secretary of State or executed meeting minutes with the General Partner stated</li> </ul>
<b>Sole Proprietorship</b>	<ul style="list-style-type: none"> <li>• Business License</li> <li>• Fictitious Name Registration (DBA), if applicable</li> </ul>
<b>Nonprofit Organization</b>	<ul style="list-style-type: none"> <li>• Articles of Incorporation</li> <li>• Copy of amended document showing name change</li> <li>• Recent meeting minutes verifying the officers</li> <li>• 501(c)(3) or nonprofit designation letter from the IRS</li> </ul>
<b>Homeowners Association</b>	<ul style="list-style-type: none"> <li>• Articles of Incorporation <ul style="list-style-type: none"> <li>– Unincorporated organizations should provide By-Laws</li> </ul> </li> <li>• Meeting minutes verifying the officers</li> </ul>
<b>Needed for CDARS® CD account</b>	<ul style="list-style-type: none"> <li>• CDARS® CD Deposit Placement Agreement</li> </ul>

## 4. Submit

**Note:** Please be sure to include any additional documentation referenced in Section 3, as applicable.

The form-approving authorized signer can submit the completed form to us through BOB using their specific login credential by selecting the **Administration** tab, then **Communications**, then **Contact Us** and add the attachment(s). Alternatively, call us at 1.855.563.3177 so we can set up secure delivery of your form via encrypted email. We're available weekdays from 8 a.m.–5 p.m. (ET).

**For bank use only:** \_\_\_\_\_  
Date                      FC number                      Associate name (**Print first & last name**)