



# Program Contract Amendment

## CHANGE IN NAME

**CONTRACT TYPE (SELECT ONE)**  **Quality Jobs**  **Enterprise Zone**

I, \_\_\_\_\_ of \_\_\_\_\_  
Printed Name and Title Business Name

Request a change in name only for contract number \_\_\_\_\_  
Contract Number

From \_\_\_\_\_ to \_\_\_\_\_  
Prior Business Name New Business Name

Effective Date of Change: \_\_\_\_\_

This instrument will be considered by the undersigned as an amendment to the above contract accepting this amendment when it has been approved and executed by the State through an authorized representative of the Board of Commerce and Industry.

### Witnesses to the party of the Business:

\_\_\_\_\_  
Witness one Signature and Printed Name Business Official Signature

\_\_\_\_\_  
Witness two Signature and Printed Name Business Official Printed Name and Title

### (FOR OFFICE USE ONLY)

The above supplemental agreement is hereby acknowledged by the State of Louisiana, Board of Commerce and Industry as an amendment to the above Contract, accepting the change herein above described on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

By \_\_\_\_\_  
Authorized Representative Board of Commerce and Industry

### Submit 2 originals and a \$250 processing fee to:

Louisiana Economic Development  
Office of Business Incentive Services  
P.O. Box 94185  
Baton Rouge, LA 70804-9185