



Robert L. Quinn
Commissioner of Safety

**New Hampshire Department of Safety
Division of Motor Vehicles
23 Hazen Drive, Concord, NH 03305**



John C. Marasco
Director of Motor Vehicles

Corporate Name and/or Address Change Form

Corporate I.D. # _____ Federal I.D. # _____ - _____

OLD Name: _____

OLD Mailing Address: _____
Street City State Zip

OLD Legal Address: _____
Street City State Zip

NEW Name: _____

NEW Mailing Address: _____
Street City State Zip

NEW Legal Address: _____
Street City State Zip

Signature: _____ Date: _____
(Signed under penalty of unsworn falsification pursuant to RSA 641:3)

For official use only:

Has the old location been closed: Yes ___ No ___
**Proof of Name/Address Change must be attached

DATE: _____ **BY:** _____ **EXT.** _____