



COMPANY NAME CHANGE REQUEST FORM

Use this form to initiate an update request to change the name of your company that is currently licensing a GS1 Company Prefix(es) by GS1 US, Inc. ("GS1 US").

Complete and return this form along with all applicable supporting documentation to GS1 US. Acceptance of this form by GS1 US will ensure your company's new information is properly registered with us. There are no fees associated with requesting a company name change from GS1 US. If you have any questions or concerns, please contact dmaintenance@gs1us.org

STEP	INSTRUCTIONS
1.	Complete this form by filling in the fields below to begin a request for a company name change.
2.	If the name change is the result of a merger, acquisition, or divestiture, you must submit a Prefix Transfer Request Form .
3.	Appropriate documentation must be included with this form. Additional examples of acceptable documents supporting the GS1 Company Name Change can be found at our Name Change Request page . In some situations additional documentation may be requested. Companies that have regulated healthcare products should notify the U.S. FDA of any change in name or ownership. This notification is the responsibility of the company not GS1 US, Inc.
4.	Please use full legal company names when filling out the form. Refrain from the use of a DBA (doing business as), assumed company name, or fictitious company name.
5.	The completed form, along with the supporting documents can be sent to: EMAIL: dmaintenance@gs1us.org MAIL: GS1 US, Inc., 7887 Washington Village Drive, Suite 300, Dayton, Ohio 45459
6.	Submitting this form does not guarantee completion of the process. Please allow a minimum of three (3) business days for GS1 US to review your request and contact you. Each request is unique and in some cases may take additional time to review.
7.	For assistance completing this form, contact the GS1 US Business Support Services Team at dmaintenance@gs1us.org or +1 937.435.3870.

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CHANGE IN COMPANY NAME OR BUSINESS FORMATION

COMPLETE THE FOLLOWING INFORMATION:

Old Company Name:				
Company Address 1:				
Company Address 2:				
City:	State:	Zip:	Country:	
Company Telephone:				
GS1 Company Prefix(es)				

CHECK THE APPROPRIATE REASON FOR THE CHANGE	NEW COMPANY NAME
<input type="checkbox"/> Spelling Correction	
<input type="checkbox"/> Business Formation Change (Inc., LLC, LLP, etc.)	
<input type="checkbox"/> Marketing Reasons	
<input type="checkbox"/> Other	

NOTE: Supporting documentation must be provided.

I declare and affirm that the statements made herein are true and correct to the best of my knowledge, information, and belief.

Name of person completing this form

Company Name

Title

Email

Telephone