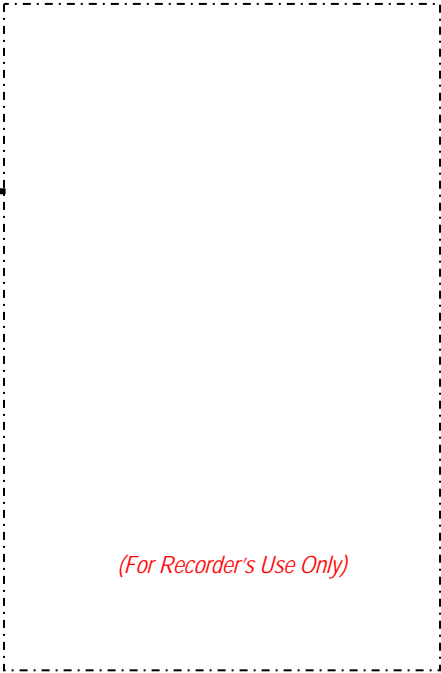




Sussex County Clerk
83 Spring St., Suite 304
Newton, NJ 07860

Phone: 973-579-0900
Email: info@sussexcountyclerk.org

DISSOLUTION OF
TRADE NAME



NOTE: This form must be completed and then signed before the county clerk or other such person authorized in the state to take such oaths; a fee of \$25 is due the County Clerk upon submission, payable in cash or money order.

I (We), _____
(Name of Business Member)

(Name of Business Member)

(Name of Business Member)

(Name of Business Member)

(For Recorder's Use Only)

the undersigned business member(s), do hereby certify that (I / we) (was / were) conducting or transacting business under the name of:

at the business address of: _____
(Street) (Suite / Apt. #) Use address where business was transacted

(City) (State) (Zip Code)

in the County of Sussex, State of New Jersey, as Docket No.: _____ in Book _____, on Page _____, opened the _____ day of _____ A.D., which certificate is still on record, and I (we) now desire herewith to have the same cancelled and discharged of record.

NOTARY MUST COMPLETE THIS SECTION, AND BUSINESS MEMBER(S) MUST SIGN THEIR NAME IN FRONT OF THE NOTARY.

IN WITNESS WHEREOF, I have this _____ day of _____, 20____ made and signed this certificate.

(Signature of Business Member) (Signature of Business Member)

State of New Jersey) ss: _____ (Signature of Business Member) _____ (Signature of Business Member)
County of Sussex)

The undersigned, being duly sworn according to law, on oath depose and say that the person(s) named in the foregoing certificate and the statements contained herein are true.

Sworn and subscribed
before me this _____ day _____ (Signature of County Clerk, Attorney or Notary Public)
of _____,
20 ____ A.D. _____
(Print Name of County Clerk, Attorney or Name and Exp. Date of Notary Public)

