

CERTIFICATE OF DISSOLUTION

hereby make the following statement of dissolution of Firm's name or partnership Certificate in pursuance of the provisions of the Revised Statutes 56:1-2 and 56:1-3 pertaining to the regulation of the use of business names.

1. The name under which I / we have been conducting and transacting business was

in accordance with a trade name certificate filed in the office of the Essex
County Clerk on _____, 19 .

2. The business so conducted by me /us was that of

3. The place where the business was conducted and transacted was at

4. The full name or names and post office address or addresses of all the person or persons connected with the said business as owner or owners, viz:

5. The said business or firm has been dissolved and the said County Clerk is hereby authorized to file and record this certificate of dissolution.

Dated:

_____	_____
_____	_____
_____	_____

STATE OF NEW JERSEY)
)ss:
COUNTY OF ESSEX)

of full age, being duly sworn according to law, say that he is / they are the person or persons named in the foregoing certificate and that the statements contained therein are true.

SUBSCRIBED AND SWORN TO BEFORE ME

this _____ Day of _____
19 .

Officer Taking Affidavit