



Douglas County
Clerk-Treasurer's office

FILED

NO. Date:
By: Deputy Clerk
Douglas County Clerk's office

Termination of Fictitious Firm Filing

You may only use this form to terminate the business, or your ownership
in the business pursuant to NRS 602.040 and NRS 602.055

- Termination of Business
Termination of Ownership

The undersigned do/does hereby certify that they are no longer conducting business in Douglas County, Nevada, under the

Fictitious Firm Name: and

Filing Number: as of Date/Time of Termination

The business was being conducted as:

- A Natural Person
An Artificial Person
A General Partnership
A Trust
A Series LLC

By the following person(s) whose name(s) and address(es) are as follows:

Signed By: Full Name of Authorized Signer Signature (Must be signed before a Notary Public)

Street Address of Business or Residence City, State, Zip

Mailing Address (Required if different than address above) City, State, Zip

Signed By: (Use if needed) Full Name of Authorized Signer Signature (Must be signed before a Notary Public)

Street Address of Business or Residence City, State, Zip

Mailing Address (Required if different than address above) City, State, Zip

By signing above, I declare (or affirm), under penalty of perjury, that all statements made in this document are true, and that I have authority to sign on behalf of and to bind the above named business/legal entity to a contract.

For additional signatures, please use additional pages

STATE OF }
COUNTY OF } SS:

This instrument was acknowledged before me on (Date)

by (Name of individual(s) whose signature(s) is/are being notarized)

Signature of Notary Public