

CANCELLATION OF FICTITIOUS FIRM NAME

THE UNDERSIGNED DOES HEREBY CERTIFY THAT I AM
NO LONGER CONDUCTING BUSINESS UNDER THE NAME:

_____.

LOCATED AT:

_____.

_____.

TELEPHONE NO _____.

Dated this _____ day of _____, 20_____.

Signature

Signature

Printed Name

Printed Name

Mailing Address

Mailing Address

City, State and Zip Code

City, State and Zip Code

SIGNATURES MUST BE NOTARIZED BY A NOTARY PUBLIC OR SIGNED BY DEPUTY CLERK.

STATE OF _____

COUNTY OF _____

This instrument was acknowledged before me on _____, 20_____

By _____.

NOTARY PUBLIC or DEPUTY CLERK

CANCELLING # _____

FFNCNCL.DOC