

Certificate of Discontinuance of Business as Partners

The undersigned do hereby certify that they have conducted or transacted business as partners under the name of designation of _____ at _____ County of _____, State of New York and that a certificate of conducting business under as partners was filed in the office of the County Clerk, County of _____ State of New York, on the _____ day of _____ under index number _____ and that the last amended certificate was filed on the _____ day of _____ in the office of the said County Clerk under index number _____; and we hereby further certify that the filing of a certificate in the said County is no longer required for the reason that the said business was discontinued on the _____ day of _____ or the conditions under which the business is conducted have changed so that the filing of a certificate in said county is no longer required for the reason that

The full names of all the persons named in the original certificate or the amended certificate last previously filed as persons conducting or transacting the business or as partners are as follows:

NAME Write "Deceased" after names of those not living.

RESIDENCE

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

We therefore desire to file this certificate of discontinuance

In Witness Whereof, the undersigned have this _____ day of _____ 20__

_____	_____
_____	_____
_____	_____

State of New York, County of _____ ss.:

On _____ before me, the undersigned, personally appeared _____ personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

(signature and office of person taking acknowledgment)

Reserved for Office Use Only