



DISSOLUTION OF TRADE NAME

Please Print or Type Clearly

BERGEN COUNTY CLERK

JOHN S. HOGAN, COUNTY CLERK

One Bergen County Plaza, Room 120

Hackensack, NJ 07601 Phone # 201-336-7006

Website: www.co.bergen.nj.us/countyclerk/

TO WHOM IT MAY CONCERN:

We hereby certify that the partnership heretofore existing under the firm or name is dissolved and no longer exists.

Trade Name: _____

Business Address: _____

Town: _____ **Zip Code:** _____

Description of Business: _____

Date Registered: _____ **Original Trade Name No.:** _____

Business Phone: _____

The true names and addresses of the persons who have carried on the business are as follows:

(Do Not Sign Until in the Presence of a Notary Public)

Owner #1 Name: _____

Residence: _____

City/State/Zip: _____

Signature: _____

Owner #2 Name: _____

Residence: _____

City/State/Zip: _____

Signature: _____

Owner #3 Name: _____

Residence: _____

City/State/Zip: _____

Signature: _____

AND SAID BUSINESS WILL BE CONTINUED BY:

Owner #1 Name: _____

Residence: _____

City/State/Zip: _____

Owner #2 Name: _____

Residence: _____

City/State/Zip: _____

STATE OF NEW JERSEY

COUNTY OF BERGEN

Being each of them duly sworn, depose and say that the statements in the above certificate are true, accurate and complete. Subscribed and sworn to before me this _____ day of _____.

Notary Public

N.J.S.A. 56:1-1

Notice: This form is provided as a convenience to the customers of the Bergen County Clerk. It does not imply legal advice as to the form or its content. The filing of this Trade Name Certificate does not preclude the use of this name by an incorporated entity.