

**NOTICE OF DISSOLUTION OF CO-PARTNERSHIP OR
BUSINESS UNDER ASSUMED NAME**

GENESEE COUNTY CLERK

FILING FEE \$10.00

STATE OF MICHIGAN
COUNTY OF GENESEE

Notice is hereby given that the co-partnership or business heretofore conducted under the name and address of:

Name of Business: _____

Address of Business: _____

City, State, Zip: _____

has been dissolved and is no longer engaged in business.

SIGNATURE OF CO-PARTNERS OR MEMBER OF BUSINESS

STATE OF MICHIGAN
COUNTY OF GENESEE

On this _____ day of _____, A.D. 20_____, the above signer(s) personally appeared before me and identified themselves and acknowledged that they freely and personally signed the above notice.

(Notary Public Signature) _____

(Printed Name) _____ Notary Public, _____ County, Michigan.

My Commission Expires: _____

(Form below for use of County Clerk)

File Date:

Mail this notice, notarized with the \$10.00 fee to: Genesee County Clerk, Assumed Names, 900 S. Saginaw St, Flint, MI 48502.
Payment by mail must be made by money order.