Certificate of Discontinuance of Business

(Partnership or Limited Liability Partnership)

The undersigned hereby certify / certifies that a certificate of doing business under the name of:

_____
(business name)

for the conduct of business at _____, _____,
(address) *(city, town)*

County of Erie, State of New York _____ was filed in the office of the County Clerk of **Erie** on
(zip code)

the _____ day of _____, _____ under _____; that the last amended
(date) *(month)* *(year)* *(book and page)*

certificate was filed on the _____ day of _____, _____ in the office of the said County
(date) *(month)* *(year)*

Clerk under _____; and we hereby further certify that the filing of a certificate in said
(book and page)

County is no longer required for the reason that the said business was discontinued on the _____ day of
(date)

_____, _____ or the conditions under which the business is conducted have changed so that
(month) *(year)*

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)	*(Address)* *(add additional pages, if necessary for additional signatures)*
_____	_____
_____	_____
_____	_____
_____	_____

We therefore desire to file this Certificate of Discontinuance.

In Witness Whereof, we have signed this certificate on the _____ day of _____, _____.
(date) *(month)* *(year)*

_____	_____
(Print name:) _____	*(Print name:)* _____
_____	_____
(Print name:) _____	*(Print name:)* _____

State of New York
County of Erie } SS.:

On the ____ day of _____, _____ 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) acted, executed the instrument.

_____
(Signature and office of individual taking acknowledgement)