Notice of Dissolution of Business under Assumed Name or Co-partnership

STATE OF MICHIGAN }
} ss.
COUNTY OF IOSCO }

Notice is herby given that the business/co-partnership conducted under the assumed name of

_____

located at _____

has been dissolved and is no longer engaged in business.

Dated:_____

Full name of Members of Business or Co-partnership

_____
Printed Name

_____
Signature

_____
Printed Name

_____
Signature

_____
Printed Name

_____
Signature

STATE OF MICHIGAN }
} ss.
COUNTY OF IOSCO }

Subscribed and sworn to before me this _____ day of _____, 20___

_____
, Notary Public

Iosco County, Michigan
My Commission Expires _____