

BERRIEN COUNTY CLERK'S OFFICE

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FOR OFFICE USE ONLY

Certificate No. _____

**CERTIFICATE OF DISCONTINUANCE
OF BUSINESS UNDER ASSUMED NAME
OR COPARTNERSHIP
(FILING FEE: \$10.00)**

**STATE OF MICHIGAN)
COUNTY OF BERRIEN)**

Notice is hereby given that the business or copartnership heretofore conducted under the assumed name of _____

located at _____

has been dissolved and is no longer engaged in business.

Dated: _____

SIGNATURE OF ALL OWNERS: (Must be signed in the presence of a notary public.)

**STATE OF MICHIGAN)
COUNTY OF BERRIEN)**

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

_____ Personally Appeared

Signature of Notary _____

Printed name of Notary _____

Notary Public _____ County, Michigan

Commission expiration _____