



Barry County Clerk
Pamela A. Palmer
 220 W. State Street, Hastings MI 49058
 Phone (269) 945-1285 Fax (269) 945-0209

Original DBA Filing No. _____
Date of Dissolution: _____

**NOTICE OF DISSOLUTION
 CERTIFICATE OF ASSUMED NAME OR CO-PARTNERSHIP**

Notice is hereby given that the business or co partnership conducted under the business name of:

Name of Business: _____

Address of Business: _____

Mailing Address: (If Different) _____

has been dissolved and is no longer engaged in business.

Name of persons owning, conducting, transacting or composing the above business address.
 ***Name of Person Residence Address (Street, City, State & Zip)

(Print) _____

(Print) _____

(Print) _____

(Print) _____

***Only one of the co partners must sign to dissolve the business

Signature of all persons listed above:

 (Signature)

 (Signature)

 (Signature)

 (Signature)

STATE OF MICHIGAN
County of Barry

Subscribed and sworn to before me on __ day of _____, 20__,
 by all the persons listed above.

Notary Signature: _____
 Print or Type Name of Notary _____, Notary Public, Barry County, Michigan.
 My Commission expires: _____