

File Date: _____

DBA File Number # _____

OFFICE of the COUNTY CLERK /REGISTER OF DEEDS
VITAL RECORDS DIVISION

NOTICE OF DISSOLUTION OF BUSINESS APPLICATION

Justin F. Roebuck
County Clerk/ Register of Deeds



Sherri Sayles
Chief Deputy Clerk

Ottawa County

Cash/Check/Money Order/Visa, MasterCard or Discover card are accepted.

Send this completed application and \$10, payable to:

Ottawa County Clerk
12220 Fillmore Street, Room 130
West Olive, MI 49460
616-994-4531

Notice is hereby given that the following Co-partnership or Assumed Name has been dissolved and is no longer engaged in business.

Name of Business: _____

Address of the business: _____

Date business was dissolved: _____ Telephone: _____

Owner: _____
PLEASE PRINT SIGNATURE

Owner: _____
PLEASE PRINT SIGNATURE

Owner: _____
PLEASE PRINT SIGNATURE

Owner: _____
PLEASE PRINT SIGNATURE

Sign in front of a notary

Acknowledged before me this _____ day of _____ A.D. 20____, by all persons listed above.

State of _____ (Signature) _____

County of _____ (Print) _____

Notary Public, _____ County, State of _____

(Notary Seal)

My Commission Expires: _____

Acting in the County of: _____

Office Use Only - Do Not write/stamp/seal below this line.

State of Michigan, County of Ottawa

I, JUSTIN F. ROEBUCK, Clerk of the County of Ottawa and of the Circuit Court thereof, do hereby certify that I have compared the forgoing copy of Business Registration Dissolution with the original on record in my office, and that same is a correct transcript therefrom, and of the whole of such original. IN TESTIMONY WHEREOF, I have hereunto set my hand affixed the seal of said Circuit Court, at the City of Grand Haven, this _____ day of _____ A .D. 20_____.

Justin F. Roebuck, Ottawa County Clerk/Register of Deeds

By: _____
Deputy Clerk