



OCEAN COUNTY CLERK'S OFFICE
CANCELLATION OF
BUSINESS NAME

SCOTT M. COLABELLA, COUNTY CLERK

OCEAN COUNTY COURTHOUSE
P.O. BOX 2191, TOMS RIVER, N.J. 08754-2191

(732) 506-5198 1-800-722-0291
www.oceancountyclerk.com

State of New Jersey,
County of

}

I, (we) \_\_\_\_\_
(circle one)

do hereby certify that I (we) \_\_\_\_\_ (was) \_\_\_\_\_ (were) \_\_\_\_\_ conducting or transacting business under the name of
(circle one) (circle one)

(print or type business name)

at \_\_\_\_\_ in the
(print or type full business address)

County of Ocean and having filed a certificate in the office of the County Clerk County of Ocean on the

\_\_\_\_\_ day of \_\_\_\_\_, which certificate is
(month) (year)

still on record and I (we) now desire herewith to have the same cancelled and discharged of record.

Table with 3 columns: NAMES, RESIDENCE, P.O. ADDRESS. Multiple rows of dotted lines for entry.

State of New Jersey,
County of

}

(sign in front of notary)

On this \_\_\_\_\_ personally appeared \_\_\_\_\_
who I am satisfied is the person named in the forgoing instrument.

Sworn to and Subscribed before me this

A.D. \_\_\_\_\_ day of \_\_\_\_\_
before me at

NOTARY SIGNS HERE