

CHAUTAUQUA COUNTY CLERK
1 N. ERIE ST. MAYVILLE NY 14757
716-753-4331



For office use only

Discontinuance Certificate: BC _____

CERTIFICATE OF DISCONTINUANCE OF BUSINESS SOLE PROPRIETOR

I HEREBY CERTIFY THAT I HAVE CONDUCTED OR TRANSACTED BUSINESS UNDER THE NAME OR DESIGNATION:

Name of Business _____

Address of Business	City	NY	State	Zip code
CHAUTAUQUA	()			
County	Telephone			

CERTIFICATE INFORMATION: The following certificate(s) were filed with the Office of the County Clerk, Chautauqua County, New York
Certificate number: BC _____ Date Original was filed: _____

Last Amendment Date: _____ Amendment Certificate number: BC _____

I HEREBY FURTHER CERTIFY THAT THE FILING OF A CERTIFICATE IN SAID COUNTY IS NO LONGER REQUIRED, EFFECTIVE THIS ____ DAY OF _____ IN THE YEAR 20__ AS THE SAID BUSINESS WAS DISCONTINUED OR THE CONDITION UNDER WHICH THE BUSINESS IS CONDUCTED HAVE CHANGED AND A CERTIFICATE IN SAID COUNTY IS NO LONGER REQUIRED FOR THE FOLLOWING REASON: _____

I THEREFORE DESIRE TO FILE THIS CERTIFICATE OF DISCONTINUANCE.

IN WITNESS WHEREOF, I have signed this certificate

on this ____ day of _____ 20__

Signature _____
Age if under 18 _____

STATE OF NEW YORK
COUNTY OF CHAUTAUQUA

On _____ before me, the undersigned, a Notary Public in and for said State, personally appeared

_____ Personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose names(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public