

Notice of Dissolution of Co-Partnership or
Business under Assumed Name

STATE OF MICHIGAN) ss.
COUNTY OF MACKINAC)

Notice is hereby given that the co-partnership or business heretofore conducted under the assumed name of _____ located at _____ has been dissolved and is no longer engaged in business.

Dated: _____

Full Name of Co-Partners or Members of Business

STATE OF MICHIGAN) ss.
COUNTY OF MACKINAC)

On this _____ day of _____, 2007, _____, personally appeared to me, personally known to be the same person that described in and who executed the foregoing instrument, and acknowledged to me that ___he___ executed the same.

Notary Public

Mackinac County, Michigan
My Commission Expires: _____