

# Certificate of Discontinuance of Business

The undersigned certify that they have conducted or transacted business under the name or designation of

located at \_\_\_\_\_ in the  
Street city state zip code

City, Town, or Village of \_\_\_\_\_ County of Cayuga, State of New York and that  
(please circle one)

a business certificate of assumed name was filed in the Cayuga County Clerk's office on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ under document number \_\_\_\_\_; the last amended certificate was on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ under document number \_\_\_\_\_; further certified that said business was discontinued on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ or the conditions under which it was conducted have changed, so that the filed certificate is no longer required, for the reason: \_\_\_\_\_.

Therefore the undersigned desires to file this certificate of discontinuance.

Print Name \_\_\_\_\_ Signed \_\_\_\_\_  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Address \_\_\_\_\_  
Street city state zip code

State of New York, County of \_\_\_\_\_ RPL309-a **(Do not use outside New York State)**

On \_\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_

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

\_\_\_\_\_  
Notary Public