

CERTIFICATE OF DISSOLUTION OF TRADE NAME

By Businesses Registered with the State Corporation Commission CERTIFICATE TO BE FILED BY PERSON(S)/OFFICER DISSOLVING A BUSINESS REGISTERED IN THE COMMONWEALTH OF VIRGINIA UNDER AN ASSUMED OR FICTITIOUS NAME.

I/we _____,
do hereby certify that I/we dissolve the business of _____,
(FICTITIOUS TRADE NAME OF BUSINESS)

which was located at _____,
(Address) (City) (State) (Zip Code)

My/our Post Office address is: _____
_____.

My/our Residence address is: _____
_____.

My/our Phone number is: (_____) _____ (_____) _____

Type of Fictitious Name Recorded: Corporation _____ Limited Liability Co. (LLC) _____
General Partnership _____ Limited Partnership (LP) _____

This fictitious name was originally filed in Book # _____, Page # _____, or Instrument #, _____
on ____ day of _____, 20 ____.

Legal Name of Business Registered with SCC

BY: _____
Signature of Officer

TITLE: _____

Commonwealth of Virginia

County of _____, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that _____, whose name(s) is/are signed to the foregoing and hereunto annexed Certificate dated the ____ day of _____, _____ has/have this day personally appeared before me and acknowledged the same before me in my office.

Given under my hand this _____ day of _____, _____.

Deputy Clerk(Notary Public)

In the Clerk's Office of the Circuit Court of Dinwiddie County, Virginia, on ____ day of _____, 20____, this Certificate with the Certificate of Acknowledgment annexed, was recorded and filed and admitted to record.

TESTE: J. Barrett Chappell, Jr., CLERK

BY: _____
Deputy Clerk