

**COUNTY OF KENDALL
OFFICE OF THE COUNTY CLERK
111 WEST FOX STREET
YORKVILLE, ILLINOIS 60560**

CANCELLATION OF THE REGISTRATION OF A CERTIFICATE OF BUSINESS

On the ____ day of _____ A.D. _____, the original Certificate of Ownership No. _____ was filed for:

NAME OF FIRM: _____

LOCATION: _____

I, _____, being the owner (s) of the aforementioned firm, as shown in the certificate heretofore filed, DO HEREBY CERTIFY THAT effective _____ A.D. 20 _____, the business shown in the registration certificate mentioned above has ceased doing business under the name as filed.

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STATE OF ILLINOIS)
) SS
COUNTY OF KENDALL)

I, _____, swear and affirm that the foregoing is a true and correct report of the real full name or names of the person or persons owning, conducting or transacting the business of the above named firm.

Signed: _____

Subscribed and sworn to before me this _____ day of _____ A.D. 20 _____

Notary Public or County

*NOTE: When addition of name effectuates change or transfer of 25% or more of total ownership, notice of filing Supplemental Assumed Name Certificate must be published.