

**JOANNE RAJOPPI**  
UNION COUNTY CLERK  
(908) 527-4787  
FAX (908) 558-2589



**BUSINESS DIVISION**

(908) 527-4966  
(908) 527-4967  
FAX (908) 558-2673

**ELECTIONS DIVISION**

(908) 527-4996  
FAX (908) 558-3592

**RECORDING DIVISION**

(908) 527-4787

**COUNTY OF UNION  
OFFICE OF THE COUNTY CLERK**

2 BROAD STREET  
ELIZABETH, NEW JERSEY 07207

**CANCELLATION OF BUSINESS NAME**

**State of New Jersey**  
**County of }SS**

I, (we) \_\_\_\_\_ do hereby certify that I (we)  
was/were conducting business under the name of \_\_\_\_\_ at  
(print or type business name)

\_\_\_\_\_  
(print or type full business address)

in the Office of the County Clerk, County of Union and having filed a certificate in the office of the County  
Clerk of Union County on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, which certificate is still on record  
(month)  
I (we) now desire herewith to have the same cancelled and discharged of record.

NAMES	RESIDENCE	P.O. ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**State of New Jersey**  
**County of }SS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Sign in front of Notary)

being duly sworn, say(s) that \_\_\_\_\_ the person(s) named in the  
foregoing certificate and the statements contained therein are true.

Sworn to and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary's Name (Print or type)

\_\_\_\_\_  
Signature of Notary