



**Tioga County Clerk**  
16 Court Street, PO Box 307  
Owego, NY 13827  
Phone 607-687-8660

---

**CERTIFICATE OF DISCONTINUANCE OF BUSINESS**

---

I HEREBY CERTIFY that I have conducted or transacted business under the name or designation of

\_\_\_\_\_

(Business Name –Print)

Located at \_\_\_\_\_

(Business Street Address, Town, State & Zip - no PO Box – Print)

County of Tioga, State of New York and that a certificate of conducting business under an assumed name was filed in the office of the Tioga County Clerk, County of Tioga, State of New York on \_\_\_\_\_ under index number \_\_\_\_\_; and I hereby further certify that the filing of a certificate in said County is no longer required for the reason that the said business was discontinued on \_\_\_\_\_ or the conditions under which the business is conducted have changed so that the filing of a certificate in said Tioga County is no longer required for the reason that \_\_\_\_\_

\_\_\_\_\_.

IN WITNESS WHEREOF, I have signed this Certificate on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Signature)

STATE OF NEW YORK            )  
COUNTY OF TIOGA            )    ss:

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ before me, the undersigned personally appeared \_\_\_\_\_

Personally know to me or proved to me the basis of satisfactory evidence to be the individual whose name(s) is (are) subscribed to the within instrument, and acknowledged to me that he/she executed the same in his/her/their capacity(ies), and that by his/her/their signature(s), or the person upon which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
(Notary Public)