

Prepared by: _____
 Address: _____
 Phone No. _____
 Email Add: _____
 No Fee Required.

**TERMINATION OF BUSINESS, TRADE, ASSUMED, OR FICTITIOUS NAME
 (SDCL CHAPTER 37-11)**

The undersigned hereby certifies that I/WE no longer engage in, conduct or operate a business for profit in the State of South Dakota under the trade, assumed, or fictitious name of:

_____ and business address of _____;
 _____;

Business ID # _____;

(If you do not have BUSINESS ID # it is an 8 Digit Alpha Numeric Number & can be found at SD Secretary of State website

<https://sosenterprise.sd.gov/BusinessServices/Business/FilingSearch.aspx>); that the name of each person authorized to do business under the above name is listed below, and the same are hereby terminating their interest.

NAME OF OWNER	POST OFFICE ADDRESS	RESIDENCE ADDRESS

Signature of Owners

Executed on this _____ day of _____, 20____.

STATE OF SOUTH DAKOTA

SS

COUNTY OF _____

(PRINT NAME OF OWNERS AGAIN ON THIS LINE DIRECTLY ABOVE)

Subscribed and Sworn to before me, this
 _____ day of _____, 20____.

 NOTARY PUBLIC
 My Commission Expires: _____

Being first duly sworn, each for himself or herself says that he or she has read the foregoing certificate and knows the contents thereof and that the same is true.

Signature of Owners