

## Termination of Certificate of Business: Fictitious Firm Name

Please Print or Type

The undersigned do hereby  terminate business  terminate ownership under the Fictitious Firm Name

\_\_\_\_\_ located at  
(Fictitious Business Name)

\_\_\_\_\_, the effective date of termination being \_\_\_\_\_.  
(Street Address of Business or Residence) (Date)

Terminate ownership of the following person(s) whose name(s) and address (es) are as follows:

1. \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Full Name and Title

\_\_\_\_\_ City, State, Zip  
Street Address

\_\_\_\_\_ City, State, Zip  
Mailing Address, if different from above

2. \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Full Name and Title

\_\_\_\_\_ City, State, Zip  
Street Address

\_\_\_\_\_ City, State, Zip  
Mailing Address, if different from above

3. \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Full Name and Title

\_\_\_\_\_ City, State, Zip  
Street Address

\_\_\_\_\_ City, State, Zip  
Mailing Address, if different from above

RECEIVED AND FILED

\_\_\_\_\_  
Date

\_\_\_\_\_  
Deputy County Clerk

Please provide the following details where verification of filing should be sent:

\_\_\_\_\_ Phone Number \_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Email Address

When you have completed this form, please email to [buslic@carsoncity.gov](mailto:buslic@carsoncity.gov)

Return to Carson City Business License, 108 E. Proctor St., Carson City, NV 89701 with \$25 filing fee