



Form 4
Notice of Dissolution
 Partnership Act R.S.P.E.I. 1988, Cap. P-1
 (Individual)

Canada
 Province of
 Prince Edward Island

I, _____
 (owner's name)

of _____

_____ | | | | | | | |
 (postal code)

hereby give notice that the business carried on by me under the name of _____

and registered in the Corporate Section of the Office of the Attorney General is dissolved effective

_____ 20 ____.

 (signature of owner)

 (date)

For Departmental Use Only

Registration Date

Registration Number

 Registrar