Canada
Province of
Prince Edward Island
We, $\qquad$
of $\qquad$

(partner's name)

(Provide details of additional partners on the back of this form)
hereby give notice that the business we have carried on in partnership under the name of and registered in the Corporate Section of the Office of the Attorney General is dissolved effective

| (signature of partner) |
| :--- | :--- |

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Additional Partners
(partner's name)





[^0]:    Consumer, Corporate and Insurance Services Division
    Office of the Attorney General
    PO Box 2000
    Charlottetown, PE C1A 7N8
    Telephone: 9023684550

