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REGISTER OF DEEDS  
AND RECORDS

152

'91 DEC -2 P4:15

L. E. SPEAS  
REGISTER OF DEEDS  
FORSYTH CO. N.C.

PROBATE AND FILING FEES 5.00 PAID

**CERTIFICATE OF DISSOLUTION  
PARTNERSHIP OR BUSINESS UNDER ASSUMED NAME  
FORSYTH COUNTY, NORTH CAROLINA**

Each of the undersigned hereby certifies that the business formerly conducted in Forsyth County, N.C. is hereby dissolved as of the 2 day of December, 19 91, and is filing this information with the Register of Deeds of Forsyth County, pursuant to the provisions of G.S. 66-68.

**THE BUSINESS**

Name A+C MED Tech  
Address: 3843 Emerson Street W.S. N.C. 27127  
Street & No. City-State-Zip

**THE OWNERS**

First Name	Middle Name	Last Name	Residence Address
Debra	JEAN	SNIPES	2843 Emerson St. Winston-Salem, N.C. 27127

Signed: Debra J. Snipes  
Debra J. Snipes

If Owner is A Corporation

Name of Corporation A+C MED TECH  
Home Office Address \_\_\_\_\_

ATTEST

By: \_\_\_\_\_  
President Secretary Corporate Seal

STATE OF NORTH CAROLINA - Forsyth County

I, \_\_\_\_\_, a Notary Public of Forsyth County, NC, do hereby certify that \_\_\_\_\_ personally came before me this day and acknowledged that he is \_\_\_\_\_ secretary of \_\_\_\_\_ a North Carolina corporation, and that by authority duly given as the act of the corporation, the foregoing instrument was signed in its name by its \_\_\_\_\_ President, sealed with its corporate seal and attested by \_\_\_\_\_ as its \_\_\_\_\_ Secretary. Witness my hand and notarial seal this the \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_. My commission expires \_\_\_\_\_, 19 \_\_\_\_\_. Notary Public

STATE OF NORTH CAROLINA - Forsyth County

I, Joan Hadden Deputy Register of Deeds, a Notary Public of Forsyth County, NC, do hereby certify that Debra J. Snipes personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and notarial seal this the 2 day of Dec, 19 91. My commission expires \_\_\_\_\_, 19 \_\_\_\_\_. Notary Public

The foregoing Certificate(s) of \_\_\_\_\_ is/are certified to be correct.

This the \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.  
L.E. Speas, Register of Deeds for Forsyth County by:

\_\_\_\_\_  
Deputy/Assistant