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ORTH CAROLINA ORSYTH COUNTY	arter acces	7	DISSOLUTION OF PARTNERSHIP OR BUSINESS UNDER ASSUMED NAME
Each of the undersigned	hereby certifi	es that the bu	siness formerly conducted in Forsyth County, N. C.,
			name of K&L. Sales
vas dissolved as of the <u>18</u> 0 ereby requested to enter this f North Carolina. The name a	day of April	1 the records in	Ble, and the Register of Deeds of Forsyth County is that office in accordance with the General Statutes
John Fland (First Name) (Middle			(Residence Address)
(First Name) (Middle	Name) ()	Last Name)	(Residence Address)
(First Name) (Middle	e Name) (Last Name)	(Residence Address)
(First Name) (Middle	e Name) (Last Name)	(Residence Address)
(First Name) (Middle	e Name) (Lost Name)	(Residence Address)
(Name of Corporation)		<u> </u>	(Home Office Address)
Signed this 18 day o	f April		
John E Larger J	·		
grine of transport			
ATTEST:			
		B	President
	Secret	ary	rresident
fee \$1.00 pd	WITNESS my	hand and o ffici as, Register of I	whedged the due execution of the foregoing instrument. al seal, this 18 day of Oprio, A.D., 19 36.
Notarial Seal	L. E. Spe		Tends tother truck, Neputy
		as, negister or	V
NCAL		as, negister or	Notary Public Clerk of Superior Court My commission expires
NCDC STATE OF NORTH CAROL	INA, FORSY		V
STATE OF NORTH CAROL		TH COUNTY	My_commission_expires
STATE OF NORTH CAROL	, A	TH COUNTY	my_commission expiresrsonally came before me,
STATE OF NORTH CAROL	, A	TH COUNTY .D., 19, pe	My commission expires resonally came before me, (Name of Officer taking acknowledgment) ing by me duly sworn, says that he knows the common
Thisday of (Title of Officer) (Name of Secretary)	retary or Assistant Se	TH COUNTY .D., 19, pe who, be scretary) and is acquaint	My_commission expires
This day of (Title of Officer) (Name of Secretary)	retary or Assistant Se	TH COUNTY .D., 19, pe who, be scretary) and is acquaint	My_commission expires
Thisday of (Title of Officer) (Name of Secretary of	retary or Assistant Setion) n, and that he	TH COUNTY D., 19, pe who, be ecretary) and is acquaint the said	my_commission_expires
This day of (Title of Officer) (Name of Secretary Corporation of the said Corporation, and	tion) n, and that he saw the said_	TH COUNTY D., 19, pe who, be ecretary) and is acquaint the said	my_commission expires
Thisday of (Title of Officer) (Name of Section Seal of(Name of Corporation of the said Corporation, and said Common Seal of said Corporation of the said C	retary or Assistant Socion) n, and that he saw the said_ orporation affix	TH COUNTY .D., 19, pe who, be ecretary) and is acquaint , the said President and to said instr	my_commission expires
Thisday of (Title of Officer) (Name of Secretary Corporation of the said Corporation, and	tion) n, and that he saw the said_ orporation affix	TH COUNTY D., 19, pe who, be ecretary) and is acquaint the said President and the said instricted to said instricted to said instricted.	my_commission expires
Thisday of (Title of Officer) (Name of Section Seal of(Name of Corporation of the said Corporation, and said Common Seal of said Corporation of the said C	retary or Assistant Section) n, and that he said_ corporation affix Secretary) presence of said_	TH COUNTY D., 19, pe who, be and is acquaint the said President and to said instricted to said inst	my commission expires resonally came before me, (Name of Officer taking acknowledgment) ing by me duly sworn, says that he knows the common ed with who is the site in attestation of the execution of said instrument in the esident of said Corporation.
This day of This day of (Title of Officer) (Name of Sect seal of (Name of Corporation of the said Corporation, and said Common Seal of said Co	retary or Assistant Section) n, and that he saw the said_ corporation affix Secretary) presence of sections.	TH COUNTY D., 19, pe who, be cretary) and is acquaint the said President and to said instricted to	my_commission expires
Thisday of (Title of Officer) (Name of Secretary of Corporation of the said Corporation, and said Common Seal of sa	retary or Assistant Section) n, and that he saw the said_ corporation affix Secretary) presence of sections.	TH COUNTY D., 19, pe who, be cretary) and is acquaint the said President and to said instricted to	My_commission expires
Thisday of (Title of Officer) (Name of Section Seal of(Name of Corporation of the said Corporation, and said Common Seal of said Corporation of the said C	retary or Assistant Section) n, and that he saw the said_ orporation affix Secretary) presence of section affix WITNESS presence of section affix	TH COUNTY D., 19—, pe who, be and is acquaint the said President and to said instraigned his name aid President Eligned his name aid President Eligned his name	My_commission expires resonally came before me,
Thisday of (Title of Officer) (Name of Secretary or Assistant Secretary Officers of Secretary or Assistant Secretary Officers of Secretary Offic	retary or Assistant Sciention) n, and that he saw the said_ proporation affix Secretary) presence of saw WITNESS presence of Scientific Research	TH COUNTY D., 19——, pe who, be ecretary) and is acquaint the said President and to said instructed to said	rsonally came before me,