

New Jersey Division of Revenue

Certificate of Termination of Corporate Alternate Name

(For Use by Domestic and Foreign Profit Corporations)

Pursuant to N.J.S.A. 14A:2-2.1 (3), the provisions of the above-cited Statute, the undersigned corporation hereby applies for the termination of its Corporate Alternate Name, and for that purpose submits the following application:

1. Name of Corporation:

2. Corporation Number:

3. Alternate Name:

4. The Corporation has ceased to use the Alternate Name.

Signature:

Date:

Name:

(Same as Above Name)

Title:

(Must be Ch. of Bd. Pres. or Vice Pres.)

Instructions for Form C-150B

**TERMINATION OF ALTERNATE NAME
DOMESTIC and FOREIGN PROFIT CORPORATIONS ONLY
(Title14A)**

STATUTORY FEE: **\$75**

The MANDATORY fields are:

Field # 1 -- Business Name

List the name as it appears on the records of the State Treasurer.

Field # 3 -- Alternate Name

List the registered alternate name being terminated.

ATTESTATIONS

Provide a statement that indicates the corporation has ceased to use the alternate name.

EXECUTION (Applicant's Signature/Date)

Have the chairman, president or vice-president sign. Also, list the date of execution (signature).

These documents should be filed in duplicate. Non-profits should file in triplicate. Make checks payable to: TREASURER, STATE Of NEW JERSEY. (No cash, please)

Mail to: NJ Division of Revenue, PO Box 308, Trenton NJ 08646

FAX File: 609.984.6851 (Fax Filing is an optional expedited service subject to processing fees that are in addition to those stated above. For FAX Filing information , visit <http://www.state.nj.us/treasury/revenue/dcr/programs/ffs.html>.)