


**PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS**

<input type="checkbox"/> Return document by mail to: <hr/> Name <hr/> Address <hr/> City State Zip Code <input type="checkbox"/> Return document by email to: _____	Certificate of Dissolution Domestic Limited Liability Company DSCB:15-8872(b)(2)(i) (2/2017)  8872B
---	--

Fee: \$70

Caution: This form does not end the existence of the limited liability company or remove the limited liability company from the rolls of active associations in the records of the Department. Compare to DSCB:15-8872(f) (relating to Certificate of Termination).

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 8872(b)(2) (relating to Certificate of Dissolution), the undersigned limited liability company, desiring to wind up its activities and affairs, hereby states that:

1. The name of the limited liability company is: _____
2. The current registered office address as on file with the Department of State. *Complete part (a) OR (b) – not both:*
 - (a) _____
 Number and street City State Zip County
 - (b) c/o: _____
 Name of Commercial Registered Office Provider County
3. The company is dissolved.

IN TESTIMONY WHEREOF, the undersigned limited liability company has caused this Certificate of Dissolution to be signed by a duly authorized representative thereof this _____ day of _____, 20_____.

Name of Limited Liability Company

Signature

Title