


**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: _____	<p>Certificate of Dissolution Domestic General Partnership DSCB:15-8482(b)(2)(i) (2/2017)</p>  84821
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Fee: \$70

Caution: This form does not end the existence of the general partnership or remove the general partnership from the rolls of active associations in the records of the Department. Compare to DSCB:15-8482(b)(2)(vi) (relating to Certificate of Termination).

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 8482(b)(2)(i) (relating to Certificate of Dissolution), the undersigned general partnership, desiring to wind up its business, hereby states that:

1. The name of the partnership is: _____

2. Complete part (a) **OR** (b) – not both:

(a) The partnership is a domestic general partnership that has not elected limited liability status and the address, including number and street, if any, of its principal place of business is:

Number and street of principal office	City	State	Zip	County
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(b) The partnership is a domestic general partnership that has elected limited liability status, and the (1) address of its current registered office in this Commonwealth or (2) name of its commercial registered office provider and the county of venue is: *(Complete (1) or (2), not both)*

(1) _____

Number and Street	City	State	Zip	County
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(2) _____

Name of Commercial Registered Office Provider	County
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3. The partnership is dissolved.

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

Name of General Partnership

Signature

Title