



**Wyoming Secretary of State**  
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For Office Use Only

## Foreign Limited Partnership Certificate of Cancellation of Registration

Pursuant to W.S. 17-14-1006, the undersigned limited partnership hereby applies for a Certificate of Cancellation of Registration from the state of Wyoming.

1. Name of the limited partnership:
  
2. Organized under the laws of:  
*(State or Country)*
  
3. **The limited partnership hereby cancels its registration to do business in the state of Wyoming.**
  
4. It appoints the Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in this state.
  
5. Mailing address of the limited partnership: *(The Secretary of State will be notified of any change of mailing address.)*

Date: *(mm/dd/yyyy)* **General Partner Signature:** \_\_\_\_\_  
Print Name:

The foregoing instrument was subscribed and sworn before me by \_\_\_\_\_  
*Signatory*

<i>Notary Public</i>	<i>Notary Date (mm/dd/yyyy)</i>	<i>Notary Commission Expiration</i>
State of _____	<i>Notarial Seal</i>	
County of _____		

Contact Person: \_\_\_\_\_  
 Daytime Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
*(Email provided will receive filing evidence)*  
*\*May list multiple email addresses*

Checklist  
**Filing Fee: \$50.00** Make check or money order payable to Wyoming Secretary of State.  
 Please submit one **originally signed** document.  
**Please review form prior to submitting to the Secretary of State to ensure all areas have been completed to avoid a delay in the processing of your documents.**