



Wyoming Secretary of State
 2020 Carey Avenue, Suite 700
 Cheyenne, WY 82002-0020
 Ph. 307.777.7311
 Fax 307.777.5339
 Email: Business@wyo.gov

For Office Use Only

Registered Limited Liability Partnership Withdrawal of Registration

1. Name of the registered limited liability partnership:

2. Date of filing of the initial statement of registration in the Office of the Secretary of State on: _____
(Date – mm/dd/yyyy)

3. Reason for filing the statement of withdrawal:

4. Effective date of withdrawal, if it is not to be effective on the filing of the statement of withdrawal, provided that any effective day other than the date of filing of the statement of withdrawal shall be a date subsequent to the filing:

(Date – mm/dd/yyyy)

5. This statement of registration has been executed by one (1) or more partners authorized to execute a statement of registration.

Date: _____ **Signature:** _____
(mm/dd/yyyy)

Print Name:

Title:

Date: _____ **Signature:** _____
(mm/dd/yyyy)

Print Name:

Title:

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.
Typical processing time is 3-5 business days following the date of receipt in our office.
 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.