



State of Alaska  
 Department of Community and Economic Development  
 Division of Banking, Securities, and Corporations  
 CORPORATION SECTION  
 PO Box 110808  
 Juneau AK 99811-0808

## STATEMENT OF DISSOCIATION

Limited Liability Partnership

Pursuant to the provisions of the Alaska Statutes, the undersigned partner or partnership hereby files a Statement of Dissociation.

1. Name of the Limited Liability Partnership	Alaska Entity #:

2. The partner listed below is dissociated from the partnership:

Name of Partner or Partnership	Mailing Address	City, State, ZIP Code

Foreign Limited Liability Partnerships must attach a certified copy of the statement from the state of domicile.

A statement filed by a partnership must be executed by at least two partners or by a partner and another person authorized in the Statement of Partnership Authority. An individual who executes a statement as, or on behalf of, a partner or other person named as a partner in a statement shall personally declare under penalty of perjury that the contents of the statement are accurate.

A person who files a statement shall promptly send a copy of the statement to every nonfiling partner and to any other person named as a partner in the statement. Failure to send a copy of a statement to a partner or other person does not limit the effectiveness of the statement as to a person who is not a partner.

Signature of Partner or Authorized Person	Printed Name	Title	Date

If you have specific legal questions or concerns about this filing, you are strongly advised to consult an attorney or other professional to assist you. Mail the completed Statement of Dissociation and the **\$25.00** filing fee (in U.S. dollars) to:

State of Alaska  
 Corporations Section  
 PO Box 110808  
 Juneau, AK 99811

For additional information or forms please visit our web site at: [www.corporations.alaska.gov](http://www.corporations.alaska.gov)