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Hrs: 8:30 a.m. – 5:00 p.m. ET

FILE ONE ORIGINAL
(Two if you want a filed
stamped copy returned to you)
FEE: \$25.00

**CERTIFICATE OF
CANCELLATION OF A
LIMITED LIABILITY PARTNERSHIP**

In accordance with §47B-8 of the Code of West Virginia, the undersigned limited liability partnership adopts the following Articles of Cancellation to its Certificate of Limited Liability Partnership:

1. The name of the limited liability partnership is: _____

2. The date of the adoption of the cancellation
was: _____

3. The reason for filing the cancellation of
limited liability partnership is: _____

4. Signature of person executing document: (Attach additional sheet if needed)

Signature: _____ Date: _____

5. Contact name and phone number of person to reach in case of a problem with filing: (optional,
however, listing one may help to avoid a return or rejection of filing, if there appears to be a problem
with the document)

Contact name: _____ Phone Number: _____