PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Certificate of Termination-Limited Liability Company (15 Pa.C.S. § 8962)

Name			Document will be returned to the name and address you enter to	
Address			the left.	
City	State Zip	o Code	- -	
e: \$70				
In compliance with the	requirements of 15 Pa	C S 8 8962(d) (relating	g to termination of plan), the undersigned lim	nited liah
		ot yet become effective,		nica nao
1. Set forth in full in l	Exhibit A, attached here	to and made a part hereo	f, is a copy of the filing to be terminated.	
2. The plan has been	terminated in accordance	ce with the provisions the	erefore set forth therein	
		limited li	TIMONY WHEREOF, the undersigned ability company has caused this	
		Certificat	te of Termination to be executed this y of	
			ame of Limited Liability Company	

Signature

Title



Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

web site: www.dos.state.pa.us/corps

Instructions for Completion of Form:

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$70 made payable to the Commonwealth of Pennsylvania. Checks must contain a commercially pre-printed name and address.
- B. The following, in addition to the filing fee, shall accompany this form: two copies of a completed form DSCB:15-134B (Docketing Statement-Changes) with respect to each association affected by the terminated filing.
- C. If general partnerships, corporations, business trusts or other entities are parties to the plan, appropriate changes should be made to this form.
- D. This form and all accompanying documents shall be mailed to the address listed above.