

Diego Morales SECRETARY OF STATE BUSINESS SERVICES DIVISION

302 West Washington Street, Room E018 Indianapolis, IN 46204 Telephone: (317) 234-9768 INBiz.in.gov

INSTRUCTIONS:

- 1. Use 8½" x 11" white paper for attachments.
 2. Please <u>TYPE</u> or <u>PRINT LEGIBLY</u> in <u>INK</u>. Print all forms single sided.
 3. For additional forms please visit <u>in.gov/sos/business/division-forms</u>
- 4. Make check or money order payable to the Secretary of State.
- 5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

NOTE: This form may be used by a foreign entity that wishes to withdraw its registration to do business in Indiana.

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business		
E-mail address of business (SOS use only)		
,		
RETURN DOCUMENTS TO:		
Name		
Street address, line 1		
Street address, line 2		
0.4	Louis	
City	State	ZIP code
Telephone number	E-mail address (If different from above – SOS use only	<i>'</i>)



Indiana Code 23-0.5-5-7 23-0.5-9-28

FILING FEE: \$30.00

The undersigned, desiring to withdraw a foreign entity from the records of the Secretary of State pursuant to the provisions of Indiana Code 23-0.5-5-7, executes the following Statement of Withdrawal.

	N FOR WITHDRAWAL				
Reason for withdrawal <i>(choose one)</i> : The business will remain active in its jurisdiction of formation, but wishes	to withdrawal its registration to do hus	iness in Indiana			
The business will remain active in its jurisdiction of formation.	s to withdrawar its registration to do bus	iness in indiana.			
The business has converted to a domestic or foreign entity that is not a	filing entity.				
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ARTICLE II – ENT	ITY INFORMATION				
The name of the entity					
The jurisdiction of formation of the entity					
The date the foreign entity registered with the Secretary of State (month, day, year)					
3 , 3 , (, , , , , , , , , , , , , , ,					
ARTICLE III – BUSINESS TO REMAIN ACT (Please complete this Article if you s					
By filing this Statement of Withdrawal, the foreign entity states that it is no longer doing business in Indiana and withdraws its registration to do business in Indiana.					
By filing this Statement of Withdrawal, the foreign entity revokes the authority of its registered agent to accept service on its behalf in Indiana.					
By filing this Statement of Withdrawal, the foreign entity hereby commits to notify the Secretary of State in the future of any change in the foreign entity's mailing or e-mail address.					
If the foreign entity filing this Statement of Withdrawal is a Foreign Master LLC, the withdrawal of the Master LLC will cause the withdrawal of every associated Series.					
Provide a mailing address and e-mail address to which service of process may be delivered.					
Number and street	City	State	ZIP code		
E-mail address		<u>l</u>			
ARTICLE IV – BUSINESS HAS CONVERTED TO A DOME: (Please complete this Article if you se	STIC OR FOREIGN ENTITY THAT IS I	NOT A FILING ENT	ITY		
By filing this Statement of Withdrawal, the foreign entity surrenders its registration to do business in Indiana and revokes the authority of its registered agent to accept service on its behalf.					
Type of entity, other than a filing entity, to which the entity has converted					
Provide a mailing address or e-mail address to which service of process may be delivered.					
Number and street	City	State	ZIP code		
E-mail address	1				
In Witness Whereof, the undersigned duly authorized representative of the foreign entity executes this Statement of Withdrawal and verifies, subject					
to penalties of perjury, that the statements contained herein are true, this day of, 20					
Signature					
Printed name	Title				