

Filing Fee \$20.00

LIMITED LIABILITY COMPANY

STATE OF MAINE

TERMINATION OF STATEMENT OF INTENTION TO DO BUSINESS UNDER AN ASSUMED OR FICTITIOUS NAME

Deputy Secretary of State
A True Copy When Attested By Signature
Deputy Secretary of State

(Real Name of Limited Liability Company)

Pursuant to 31 MRSA §605-A.8, the undersigned limited liability company executes and delivers the following Termination of Statement of Intention to do Business Under an Assumed or Fictitious Name:

FIRST: The limited liability company no longer intends to transact business under an assumed or fictitious name.

SECOND: The limited liability company intends to terminate the assumed or fictitious name of

MANAGER(S)/MEMBER(S)*

DATED _____

(signature)

(type or print name and capacity)

For Manager(s)/Member(s) which are Entities

Name of Entity _____

By _____ (authorized signature)

(type or print name and capacity)

*Certificate MUST be signed by

- (1) at least one manager OR
(2) at least one member if the limited liability company is managed by the members OR
(3) any duly authorized person.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under Title 17-A, section 453.

Please remit your payment made payable to the Maine Secretary of State.

SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE, 101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101