

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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**Statement of Withdrawal from  
Registered Limited Liability Partnership**  
(15 Pa.C.S. § 8205)

Name		
_____		
Address		
_____		
City	State	Zip Code
_____	_____	_____

**Document will be returned to the name and address you enter to the left.**



Fee: \$70

In compliance with the requirements of 15 Pa.C.S. § 8205(c) (relating to statement of withdrawal), the undersigned partner of a registered limited liability partnership, desiring to evidence the partner's withdrawal from a registered limited liability partnership, hereby certifies that:

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

\_\_\_\_\_

2. The name of the person withdrawing is:

\_\_\_\_\_

IN TESTIMONY WHEREOF, the undersigned person has caused this Statement of Withdrawal to be executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Name of Person

\_\_\_\_\_

Signature

\_\_\_\_\_

Title



**Department of State  
Corporation Bureau  
P. O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
Web site: [www.dos.state.pa.us/corps](http://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 Department of State.
- B. This form shall be executed by the person identified in the form as withdrawing as a partner from the partnership. If this form is executed by the personal representative of the withdrawing partner, the execution portion of the form should be modified accordingly.
- C. Under 15 Pa.C.S. § 8205(d) the person withdrawing shall send a copy of the filed statement of withdrawal to the registered limited liability partnership.
- D. This form and all accompanying documents shall be mailed to the address stated above.