



Request for Cancellation of Reservation of Name

PLEASE TYPE OR PRINT

Under §205 of the Limited Liability Company Law

APPLICANT'S NAME AND ADDRESS

NAME RESERVED

X

*Signature of applicant, applicant's attorney or agent
(If attorney or agent, so specify)*

Typed/printed name of signer

INSTRUCTIONS:

1. The applicant must be the same applicant as stated in the Application for Reservation of Name.
2. The name reserved must be stated exactly as in the original Application for Reservation of Name, including spacing and punctuation.
3. Attach the original Certificate of Reservation, or if a Request for Extension of Reservation of Name was filed the new Certificate of Reservation, to this request.
4. This Request for Cancellation of Reservation of Name must be filed with the Department of State before the expiration of the current reservation.
5. A \$20 filing fee payable to the Department of State must accompany this Request for Cancellation of Reservation of Name.