

Instructions for Filing

ARTICLES OF DISSOLUTION OF LIMITED LIABILITY COMPANY

- Item 1** Enter the complete name of the limited liability company exactly as it appears on the records of the North Carolina Dept. of the Secretary of State.
- Item 2** Optional: Enter the NC Secretary of State ID number (SOSID#) to ensure the dissolution is filed on the appropriate entity.
- Item 3** Enter the effective date of the dissolution of the limited liability company. The date must be stated in the month/day/year format.
- Item 4** Attach any other relevant information the Managers or Other Company Officials elect to provide with the Articles of Dissolution.

Date and Execution

Enter the date the document was executed.

In the blanks provided enter:

- The name of the limited liability company as it appears in item 1.
- The signature of the Company Official of the limited liability company executing the document.
- The name and title of the above-signed representative.

State of North Carolina
Department of the Secretary of State

**ARTICLES OF DISSOLUTION OF
LIMITED LIABILITY COMPANY**

Pursuant to §57D-6-09 of the General Statutes of North Carolina, the undersigned limited liability company hereby submits the following Articles of Dissolution for the purpose of dissolving the limited liability company.

1. The name of the limited liability company is: _____.
2. *The North Carolina Secretary of State Id Number (SOSID#): _____.
3. The effective date (which shall be date certain) of the dissolution is: _____.
(See instructions)
4. Attach any other information determined by the Company Officials filing these articles.

This the _____ day of _____, 20 ____.

Name of Limited Liability Company

Signature

Type or Print Name and Title

Notes:

1. Filing fee is \$30. This document must be filed with the Secretary of State.
2. *The SOSID# is not a mandatory field, but aids in identifying the correct entity for filing.