

**Delaware Division of Corporations  
401 Federal Street – Suite 4  
Dover, DE 19901  
Ph: 302-739-3073**

**Certificate of Cancellation  
of a Limited Liability Company**

Dear Sir or Madam:

Attached please find a form for a Certificate of Cancellation of a Limited Liability Company to be filed in accordance with Section 18-203 of the Limited Liability Company Act of the State of Delaware. The fee to file the Certificate is \$220.00. You will receive a stamped “Filed” copy of the submitted document. A certified copy may be requested for an additional \$50. Expedited services are available. Please contact our office concerning these fees or you may consult our fee chart at [corp.delaware.gov](http://corp.delaware.gov).

Before the Certificate can be filed, all taxes due to the State through the effective date of the cancellation must be paid. Please contact the Franchise Tax Section prior to submitting the document for filing to determine the Annual Taxes due. Checks should be made payable to “Delaware Secretary of State”.

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don’t hesitate to call us at (302) 739-3073.

Sincerely,

Department of State  
Division of Corporations

*Special Instructions – Certificate of Cancellation of a Limited Liability Company*

*This form is to be used as a Template only. The following instructions will help you in correctly completing your Cancellation Certificate. The instructions will be numbered to correspond with the article it is referencing.*

- 1. The current name of the limited liability company exactly as it appears in our records. Please visit our website to verify the name.*
- 2. The date the limited liability company filed their Certificate of Formation with the Delaware Division of Corporations.*

***Execution Block*** - *The document must be signed by an authorized person of the limited liability company pursuant to Section 18-204 of Title 6, Chapter 18. The name of the person must be typed or written legibly underneath the signature.*

*This form contains the basic information required by statute; if you need to add additional information permitted by statute you may draft a new document. Please feel free to call our office at 302-739-3073 for assistance in completing this form or visit our website at [corp.delaware.gov](http://corp.delaware.gov).*

*Sincerely,*

*Delaware Division of Corporations*

STATE OF DELAWARE  
CERTIFICATE OF CANCELLATION  
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to cancel the limited liability company pursuant to Section 18-203 of the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is \_\_\_\_\_  
\_\_\_\_\_.

2. The Certificate of Formation of the limited liability company was filed on \_\_\_\_\_  
\_\_\_\_\_.

By: \_\_\_\_\_  
Authorized Person

Name: \_\_\_\_\_  
Print or Type