

**Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE 19901
Ph: 302-739-3073
Fax: 302-739-3812**

**Certificate of Revival
for Limited Liability Company**

Dear Sir or Madam:

Attached please find a form for a Certificate of Revival of a Limited Liability Company to be filed in accordance with Section 18-1109 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.

Before the Certificate can be filed, all taxes due to the State at the time the limited liability company became cancelled 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 the name of the person signing 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 at (302) 739-3073.

Sincerely,

Department of State
Division of Corporations

Special Instructions – Revival 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 Revival 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. List the date of filing of the original Certificate of Formation in the State of Delaware.*
- 3. List the complete name and address of the Delaware registered agent you are appointing to accept service of process for the limited liability company.*

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.

Sincerely,

Delaware Division of Corporations

**STATE OF DELAWARE
CERTIFICATE OF REVIVAL
OF LIMITED LIABILITY COMPANY**

The undersigned authorized person, desiring to revive the limited liability company pursuant to Section 18-1109 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 date of filing of the limited liability company's original Certificate of Formation in Delaware was _____.
3. The Registered Office of the limited liability company in the State of Delaware is located at _____
_____ (street), in the City of _____,
Zip Code _____. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is _____
_____.
4. The Certificate of Revival is filed by one or more persons authorized to execute and file the Certificate of Revival to revive the limited liability company.

By: _____
Authorized Person

Name: _____
Print or Type