



State of Missouri
John R. Ashcroft, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

**Notice of Abandonment of Merger or Consolidation of
Limited Liability Company**

(Submit with filing fee of \$25.00)

1. The name of each party to the proposed merger or consolidation is:

Name *Charter Number*

Name *Charter Number*

Name *Charter Number*

2. The date at which the notice of merger or consolidation was filed with the Office of the Secretary of State of Missouri is:

Month/Day/Year

3. The proposed merger or consolidation was not consummated and has hereby been abandoned.

In Affirmation thereof, the facts stated above are true and correct:
(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Authorized Signature *Printed Name* *Date*

Authorized Signature *Printed Name* *Date*

Authorized Signature *Printed Name* *Date*

Name and address to return filed document:
Name: _____
Address: _____
City, State, and Zip Code: _____