



**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: \_\_\_\_\_