

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

**MEMBERS STATEMENT
OF DISSOCIATION
FROM A LIMITED LIABILITY COMPANY**

The following member of the Limited Liability Company hereby files this Statement of Dissociation in accordance with Section 33-44-704 of the 1976 S.C. Code of Laws, as amended.

1. Name of the Limited Liability Company from which a member has dissociated:

2. Name of member who has dissociated from the Limited Liability Company:

(Name)

(Street Address)

(City, State, Zip Code)

3. Unless otherwise specified, this statement is effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time: _____
(Date)

4. This statement is being filed by:

☐

a. The dissociating member:

(Signature)

(Date)

☐

b. The Limited Liability Company:

(Signature)

(Date)

(Print Name)

(Capacity)

FILING INSTRUCTIONS

1. File two copies of this form, the original and either a duplicate original or a conformed copy. Include a self-addressed stamped envelope to have a filed copy returned to you by mail.
2. If the space in this form is insufficient, please attach additional sheets containing a reference to the appropriate paragraph in this form.
3. This form must be accompanied by the filing fee of \$2.00 payable to the Secretary of State.

Return to: Secretary of State
Attn: Corporate Filings
1205 Pendleton Street, Suite 525
Columbia, SC 29201