

**STATE OF SOUTH CAROLINA  
SECRETARY OF STATE**

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

**TYPE OR PRINT CLEARLY IN BLACK INK**

The following member of the Limited Liability Company hereby files this statement of Dissociation in accordance with Section 33-44-704 of the 1976 South Carolina 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:

\_\_\_\_\_

\_\_\_\_\_ 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:

\_\_\_\_\_

4. This statement is being filed by:

- [ ] a. The dissociating member:

\_\_\_\_\_ Signature of member Date

- [ ] b. The Limited Liability Company:

\_\_\_\_\_ Signature Date

\_\_\_\_\_ Name Capacity

**FILING INSTRUCTIONS**

1. File two copies of this form, the original and either a duplicate original or a conformed copy.
2. If space in this form is insufficient, please attach additional sheets containing a reference to the appropriate paragraph in this form, or prepare this using a computer disk, which will allow for expansion of space on 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  
P.O. Box 11350  
Columbia, SC 29211

Form Revised by South Carolina  
Secretary of State, January 2000