



Department of State  
Corporate Filings

312 Rosa L. Parks Ave.  
6<sup>th</sup> Floor, William R. Snodgrass Tower  
Nashville, TN 37243

**NOTICE OF DISSOLUTION  
(LIMITED LIABILITY COMPANY)**

Pursuant to the provisions of §48-245-101 of the Tennessee Limited Liability Company Act, or pursuant to the provisions of §48-249-609 of the Tennessee Revised Limited Liability Company Act, the undersigned Limited Liability Company submits the following Notice of Dissolution:

1. The name of the Limited Liability Company is: \_\_\_\_\_

2. If any one of the following statements apply, please mark and complete:

(a)  Dissolution was approved by members pursuant to TCA §48-245-202(b) or §48-249-603(b), and [select one]  
 the resolution was approved at a meeting held on \_\_\_\_\_ (date) [Date not required under TN Revised LLC Act]; The requisite vote of the members was received.  
(or)  
 the members validly took action without a meeting.

(b)  Dissolution is based upon the expiration of the LLC duration pursuant to TCA §48-245-101(a)(1) or §48-249-601, and the expiration date is \_\_\_\_\_ (date).

(c)  Dissolution is based upon termination of a member's interest pursuant to TCA §48-245-101(a)(5), and the continued membership of a member terminated on \_\_\_\_\_ (date).

(d)  Dissolution is based upon the occurrence of the following event as specified in the articles or operating agreement pursuant to TCA §48-249-601

\_\_\_\_\_  
\_\_\_\_\_  
and the date of the event is \_\_\_\_\_ (date).

3. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/ time is: \_\_\_\_\_, \_\_\_\_\_ (date), \_\_\_\_\_ (time).  
(A delayed effective date shall not be later than the 90th day after the date this document is filed by the Secretary of State)

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

\_\_\_\_\_  
Name of Limited Liability Company

\_\_\_\_\_  
Signer's Capacity

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (typed or printed)