

State of Tennessee



Department of State

Corporations Section
Snodgrass Tower, 6th Floor
312 Rosa L. Parks Ave.
Nashville, TN 37243

NOTICE OF CANCELLATION
OF RESERVED LIMITED
PARTNERSHIP NAME

For Office Use Only

Pursuant to the provisions of §61-2-103(b) of the Tennessee Revised Uniform Limited Partnership Act, the undersigned hereby submits this application:

1. The reserved name to be cancelled or transferred _____
_____.

2. The name and address of the applicant or transferee is:

Please check applicable box:

- Cancellation of Reserved Name
- Transfer of Reserved Name

Zip Code

Date: _____, _____

Holder of Reserved Name

By: _____
(Signature)

Name (typed or printed)

Signer's Capacity