

Form must be filed electronically.

Paper forms are not accepted.

This copy is a sample and cannot be submitted for filing.

Statement of Foreign Entity Withdrawal

filed pursuant to § 7-90-806 of the Colorado Revised Statutes (C.R.S)

1. The entity ID number, the entity name, and the true name, if different, are

Entity ID number _____
(Colorado Secretary of State ID number)

Entity name _____

True name _____
(if different from the entity name)

2. (Mark the applicable box and complete the statement. **Caution:** Mark only one box.)

The foreign entity will not maintain a registered agent in this state and service of process may be addressed to the entity and mailed to the principal address pursuant to section 7-90-704 (2), C.R.S.

OR

The foreign entity will maintain a registered agent to accept service pursuant to section 7-90 204.5, C.R.S. Such registered agent's name and address are:

Name _____
(if an individual) _____
(Last) (First) (Middle) (Suffix)

OR

(if an entity) _____
(Caution: Do not provide both an individual and an entity name.)

Street address _____
(Street name and number)

(City) CO (State) (Postal/Zip Code)

Mailing address _____
(leave blank if same as street address) *(Street name and number or Post Office Box information)*

(City) (State) (Postal/Zip Code)

(Province – if applicable) (Country – if not US)

(The following statement is adopted by marking the box.)

The person appointed as registered agent above has consented to being so appointed.

3. The principal office address of the entity's principal office is

Street address

<i>(Street number and name)</i>		

_____	_____	_____
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>

<i>(Province – if applicable)</i>	<i>(Country)</i>	

Mailing address

(leave blank if same as street address)

<i>(Street number and name or Post Office Box information)</i>		

_____	_____	_____
<i>(City)</i>	<i>(State)</i>	<i>(ZIP/Postal Code)</i>

<i>(Province – if applicable)</i>	<i>(Country)</i>	

4. The jurisdiction under the law of which the entity is formed is _____.

5. *(The following statement is adopted by marking the box.)*

The entity will no longer transact business or conduct activities in Colorado and it relinquishes its authority to transact business or conduct activities in Colorado.

6. *(The following statement is adopted by marking the box.)*

All trade names the entity has on file in the records of the Secretary of State pursuant to Article 71 of Title 7, C.R.S., and any assumed entity name pursuant to § 7-90-603, C.R.S., are withdrawn upon the filing of this Statement of Foreign Entity Withdrawal.

7. *(If applicable, adopt the following statement by marking the box and include an attachment.)*

This document contains additional information as provided by law.

8. **(Caution: Leave blank** if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are _____.
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

9. The true name and mailing address of the individual causing the document to be delivered for filing are

_____	_____	_____	_____
(Last)	(First)	(Middle)	(Suffix)

(Street number and name or Post Office Box information)			

_____	_____	_____	
(City)	(State)	(ZIP/Postal Code)	
_____		_____	
(Province – if applicable)		(Country)	

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

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