



**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU**

Date Received

AC1

(FOR BUREAU USE ONLY)

This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

Name

Address

City

State

ZIP Code

EFFECTIVE DATE:

Document will be returned to the name and address you enter above.
If left blank, document will be returned to the registered office.

APPLICATION FOR CERTIFICATE OF WITHDRAWAL
For use by Foreign Limited Liability Companies
(Please read information and instructions on the last page)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned execute the following Application:

1. The name of the limited liability company is:

2. The identification number assigned by the Bureau is:

3. It is organized under the laws of _____

4. The limited liability company is not transacting business or conducting affairs in Michigan.

5. The limited liability company hereby surrenders its authority to transact business or conduct affairs in Michigan.

6. The limited liability company revokes the authority of its resident agent to receive service of process in this state and consents that service of process in any action, suit, or proceeding based upon any cause of action arising in this state during the time the foreign limited liability company was authorized to transact business in this state may thereafter be made on the company by service upon the administrator.

7. The address to which the administrator is to mail a copy of any process against this limited liability company is:

(Name)

(Street Address)

(City)

(State)

(ZIP Code)

Signed this _____ day of _____, _____

By _____
(Signature)

(Type or Print Name)

(Type or Print Title)

Preparer's Name _____

Business telephone number (_____) _____

INFORMATION AND INSTRUCTIONS

1. The application for Certificate of Withdrawal cannot be filed until this form, or a comparable document is submitted.
2. Submit one original of this document. Upon filing, the document will be added to the records of the Corporations, Securities & Commercial Licensing Bureau. The original will be returned to your registered office address unless you enter a different address in the box on the front of this document.

Since this document will be maintained on electronic format, it is important that the filing be legible. Documents with poor black and white contrast, or otherwise illegible, will be rejected.

3. This application is to be used pursuant to section 1006 of Act 23, P.A. of 1993, for the purpose of withdrawing a limited liability company's Certificate of Authority to Transact Business in Michigan. Upon filing of this Application the limited liability company surrenders its Certificate of Authority to Transact Business in this state.
4. Item 2 - Enter the identification number assigned by the Bureau. If this number is unknown, leave it blank.
5. This Application must be signed by a person with authority to sign as provided in the laws of the jurisdiction of its organization.
6. The limited liability company must request a tax clearance within 60 days after submitting this certificate from the Michigan Department of Treasury, Tax Clearance Division, Lansing, MI 48922, (517) 636-5260.

7. **NONREFUNDABLE FEE:** Make remittance payable to the State of Michigan. Include limited liability company name and identification number on check or money order.....**\$10.00**

Veterans: Pursuant to MCL 450.5101(9)(10), if a majority of the membership interests in the foreign limited liability company responsible for paying the fee are held by 1 or more veterans who served in the United States Armed Forces, (including the reserve components) who were discharged or released under conditions other than dishonorable, you may obtain further information regarding a fee waiver at www.michigan.gov/corpveteranfeewaivers.

Submit with check or money order by mail:

Michigan Department of Licensing and Regulatory Affairs
 Corporations, Securities & Commercial Licensing Bureau
 Corporations Division
 P.O. Box 30054
 Lansing, MI 48909

To submit in person:

2501 Woodlake Circle
 Okemos, MI
 Telephone: (517) 241-6470

Fees may be paid by check, money order, VISA, MasterCard, or Discover when delivered in person to our office.

COFS (Corporations Online Filing System):

This document may be completed and submitted online at www.michigan.gov/corpfilingonline.

Fees may be paid by VISA, MasterCard, or Discover.

Documents that are endorsed filed are available at www.michigan.gov/corpenitysearch. If the submitted document is not fileable, the notice of refusal to file and document will be available at the Rejected Filings Search website at www.michigan.gov/corprejectedsearch.

LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
 CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU
 CORPORATIONS DIVISION
 P.O. BOX 30054
 LANSING, MI 48909-7554
 (517) 241-6470

EXPEDITED SERVICE REQUEST

Instructions:

If you choose to use expedited services, submit a separate Expedited Service Request form for each document submitted online, in person, or by mail for which expedited service is being requested.

Expedited fees are in addition to the standard document fees and due when document is submitted. Expedited fees are not refundable.

COFS (Corporations Online Filing System):

Expedited service can be requested when submitting a document online. You can access the online forms at www.michigan.gov/corpfileonline. Fees for documents submitted online may be paid by VISA, MasterCard, or Discover.

Documents that are endorsed filed are available at www.michigan.gov/corpenitysearch. If the submitted document is not fileable, the notice of refusal to file and document will be available at the Rejected Filings Search website at www.michigan.gov/corprejectedsearch.

Documents submitted by mail are delivered to a remote location for receipts processing and are then forwarded to the Corporations Division for review.

Day of receipt for mailed expedited service requests is the day the Corporations Division receives the request.

Please initial the appropriate box for the level of service requested

1 Hour

2 Hour

Same Day

24 Hour

Submitters Information:

Company Name (if applicable)	
Telephone	Person submitting this request
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Document Information:

Name of Corporation, LLC or Limited Partnership	ID Number (existing entity)
Type of document (articles, amendment, etc.)	

Expedited Service Level	Fees	Type of Document	Deadline for receipt of document
1 Hour, same day	\$1,000.00	Any	4:00 PM EST or EDT
2 Hour, same day	\$500.00	Any	3:00 PM EST or EDT
Same day	\$100.00	Formation/qualification	1:00 PM EST or EDT
	\$200.00	For Any Existing Entity	1:00 PM EST or EDT
24 Hours	\$50.00	Formation/qualification	
	\$100.00	For Any Existing Entity	

BUREAU USE ONLY

Agency Account	Amount	Date/Time Received	Receipt Num:
Profit Corporation (6813)			
Limited Liability Company (6814)			Check Num:
Nonprofit Corporation (6815)			
Limited Partnership (6816)			

