

**DOMESTIC  
LIMITED PARTNERSHIP**

**STATE OF MAINE**

**STATEMENT OF TERMINATION**

\_\_\_\_\_  
(Name of Limited Partnership)

\_\_\_\_\_  
Deputy Secretary of State

**A True Copy When Attested By Signature**

\_\_\_\_\_  
Deputy Secretary of State

Pursuant to [31 MRSA §1323](#), the undersigned limited partnership executes and delivers the following Statement of Termination:

**FIRST:** The date the original certificate of limited partnership was filed: \_\_\_\_\_

**SECOND:** Any other information as determined by the general partners filing this statement or by a person appointed pursuant to [31 MRSA §1393, sub-§3 or 4](#), if any, are set forth in Exhibit \_\_\_\_\_ attached hereto and made a part hereof.

**General Partner(s) \*\***

**Dated** \_\_\_\_\_

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name)

**For General Partner(s) which are Entities**

Name of Entity \_\_\_\_\_

By \_\_\_\_\_  
(authorized signature)

\_\_\_\_\_  
(type or print name and capacity)

\*This statement **MUST** be signed by ALL **general partners** listed in the certificate or by the person appointed pursuant to [31 MRSA §1393, sub-§3 or 4](#) to wind up the dissolved limited partnership's activities. ([31 MRSA §1324.1.G](#))

The execution of this application constitutes an oath or affirmation under the penalties of false swearing under [17-A MRSA §453](#).

Please remit your payment made payable to the Maine Secretary of State.

Submit completed form to:

**Secretary of State  
Division of Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101  
Telephone Inquiries: (207) 624-7752**

Email Inquiries: [CEC.Corporations@Maine.gov](mailto:CEC.Corporations@Maine.gov)

## Customer Contact Cover Letter

Name of entity(s) on the submitted filings:

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**Optional special handling request(s):** (check only if applicable)

☐

Hold attested copy for pick up (will be required to pick up at our office in Augusta, Maine)

☐

24-hour expedited filing (next business day) service: **\$50** additional filing fee per entity

☐

Immediate expedited filing (same business day): **\$100** additional filing fee per entity

**NOTE:** Only one expedite fee is required if filing multiple documents for the same entity/chapter number at the same time.

**Payment can be made by check or money order** (payable to Maine Secretary of State) or by credit card. You may obtain a credit card voucher at <https://www.maine.gov/sos/cec/forms/credit.pdf>.

Total fee(s) enclosed: \$ \_\_\_\_\_

\_\_\_\_\_  
(Name of contact person)

\_\_\_\_\_  
(Daytime telephone number)

\_\_\_\_\_  
(Contact email address for this filing)

\_\_\_\_\_  
(Email address to use for annual report reminders)

Name and address of person **to return the attested copy** of the completed filing:

\_\_\_\_\_  
(Name of attested copy recipient)

\_\_\_\_\_  
(Firm or Company)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State & Zip)

**NOTE:** Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or [cec.corporations@maine.gov](mailto:cec.corporations@maine.gov)

**Submit filings to:**

**Mailing Address if using US Postal Service**

Department of the Secretary of State  
Corporations, UCC and Commissions  
101 State House Station  
Augusta, ME 04333-0101

**Mailing Address if using FedEx/UPS**

Department of the Secretary of State  
Corporations, UCC and Commissions  
6 E. Chestnut Street, 5th Floor  
Augusta, ME 04330