



NOTICE OF DISSOLUTION OR CESSATION OF A LIMITED PARTNERSHIP

ABN 81 913 830 179

LP6

1. Contact details of the person lodging this notification

Name:
Address:
Postcode:
Daytime Phone Number:

2. What is the name of the Limited Partnership?

3. What is the registration number of the Limited Partnership?

4. What was the date of dissolution or cessation?

5. Signature

All general partners, or a general partner authorised by all the general partners, must sign this notification.

(a) Signature of an authorised General Partner:

Full name of general partner authorised by all the general partners to sign this notification:

Where the general partner is a corporation, please indicate the position held by the person signing this notification:

Director Secretary Authorised Officer

Full name of person signing:

Signature:

Date:

(b) Signature by all the General Partners:

Full name of general partner:

Where the general partner is a corporation, please indicate the position held by the person signing this notification:

Director Secretary Authorised Officer

Full name of person signing:

Signature:

Date:

Full name of general partner:

Where the general partner is a corporation, please indicate the position held by the person signing this notification:

Director Secretary Authorised Officer

Full name of person signing:

Signature:

Date:

More than 2 general partners required to sign? Please copy this page as required.

No Fee payable when lodging this notification

Lodging the notification

You can lodge this notification in person at any Service NSW Centre or mail it to:

Registry Services
PO Box 22
Bathurst NSW 2795
Enquiries: 1800 502 042

Please note that notifications will not be processed on the spot by Service NSW Centres.

For the address of your nearest Service NSW Centre please telephone 13 32 20 or visit www.fairtrading.nsw.gov.au.