

# Statement of Designation Cancellation of a Virginia Protected Series by a Virginia Series Limited Liability Company Instructions

<b>Filing Requirements</b>							
<b>Required Fees</b>	<b>Filing Fee: \$25.00</b>						
<b>File Online Today</b>	<b>Paper Filing</b>						
Visit <a href="https://cis.scc.virginia.gov">https://cis.scc.virginia.gov</a> to file a Statement of Designation Cancellation for a Virginia Protected Series by a Virginia Series Limited Liability Company in real time.	Download from <a href="https://scc.virginia.gov/pages/Virginia-Limited-Liability-Companies">https://scc.virginia.gov/pages/Virginia-Limited-Liability-Companies</a> complete, print, and mail or deliver to below address:						
<b>Questions?</b>  Visit the CIS help page at <a href="https://scc.virginia.gov/pages/CIS-Help">https://scc.virginia.gov/pages/CIS-Help</a> for how-to guides, answers to frequently asked questions, and helpful videos.	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>State Corporation Commission Clerk's Office</b></td> <td style="width: 40%;"><b>Courier Delivery Address</b></td> </tr> <tr> <td>P.O. Box 1197</td> <td>1300 E. Main St, 1<sup>st</sup> floor</td> </tr> <tr> <td>Richmond, VA 23218-1197</td> <td>Richmond, VA 23219</td> </tr> </table>	<b>State Corporation Commission Clerk's Office</b>	<b>Courier Delivery Address</b>	P.O. Box 1197	1300 E. Main St, 1 <sup>st</sup> floor	Richmond, VA 23218-1197	Richmond, VA 23219
<b>State Corporation Commission Clerk's Office</b>	<b>Courier Delivery Address</b>						
P.O. Box 1197	1300 E. Main St, 1 <sup>st</sup> floor						
Richmond, VA 23218-1197	Richmond, VA 23219						
Pay online with a credit card or eCheck. No additional processing fees apply for filing online.	Include a check payable to State Corporation Commission. <b>DO NOT SEND CASH.</b>						

## Specific Instructions

### I Series Limited Liability Company Name

Provide the name of the series limited liability company that established the protected series. Set forth the SCC ID number of the series LLC (optional).

### II Protected Series Name

Provide the name of the protected series that was established by the series limited liability company.

### III Identification Number

Set forth the protected series SCC ID number. To obtain the protected series' SCC ID number, visit <https://cis.scc.virginia.gov>, or contact the Clerk's Office.

### IV Effective Date

The protected series' effective date is the date the Commission accepted the statement of designation, or the delayed effective time and date stated in the statement of designation.

### V Winding Up of Affairs

The protected series must complete the winding up its affairs before filing a statement of designation cancellation.

### V Other Information (optional)

Members may choose to include the reason for canceling the protected series.

### Signature

The statement of designation cancellation must be signed by the series LLC that created the protected series. One of the following officials with the right and power to manage the series LLC's business affairs must sign:

- a manager or other selected person
- a member (e.g., an owner is a member), if there is no manager or other person selected
- an organizer, if the entity began without managers or members and no members exist
- a receiver, trustee, or other court-appointed fiduciary, if applicable

Do **not** use the following titles:

- Owner
- Registered Agent
- Attorney
- Authorized Person
- Officer

If signing on behalf of a manager or member that is a business entity, also include the business entity's name and the business entity's relationship to the series LLC.

Include the signature, printed name, position title (e.g., manager or member), and date signed. Providing an entity phone number or email address allows for quicker communication if there is an issue with the filing.

## Important Information

The statement must be in the English language, printed in black, using the following guidelines:

- use solid white paper
- one-sided
- minimum 1.25" top margin and 0.75" all other sides
- size 8 1/2" x 11"
- no visible watermarks or background logos

**Do not include personally identifiable information**, such as a Social Security number, in a business entity document submitted to the Office of the Clerk for filing with the Commission. Information in these documents is available to the public. For more information, see Notice Regarding Personally Identifiable Information at [www.scc.virginia.gov/clk](http://www.scc.virginia.gov/clk).



Form  
**LLC1099.12**  
(Eff. 07/21)

State Corporation Commission

**Statement of Designation Cancellation  
of a Virginia Protected Series by a  
Virginia Series Limited Liability  
Company**

Pursuant to § 13.1-1099.12 of the Code of Virginia, the undersigned, on behalf of the series limited liability company named below, states as follows:

**I** The name of the series limited liability company that established the protected series is

\_\_\_\_\_

\_\_\_\_\_

SCC ID No. (optional): \_\_\_\_\_

**II** The name of the protected series established by the series limited liability company is

\_\_\_\_\_

\_\_\_\_\_

**III** The identification number issued by the Commission to the protected series is \_\_\_\_\_.  
(SCC ID No.)

**IV** The effective date of the certificate of protected series designation is \_\_\_\_\_.

**V** The protected series has completed the winding up of its affairs.

**VI** Any other information that the associated members of the protected series have determined to include herein, including the reason for the filing of the statement of designation cancellation (optional):

\_\_\_\_\_

\_\_\_\_\_

**Signature**

*The person signing this document has been delegated the right and power to manage the series limited liability company's business affairs and affirms the above statements are true.*

Signature	Printed Name	Title	Date	Tel. # (optional)	Email Address (optional)

**Business Tel. # (optional)**

**Business Email Address (optional)**

**Required Fee: \$25.00**