L-223 Rev. 3/2013

New Jersey Division of Revenue & Enterprise Services

Certification of Resignation of Registered Agent Without Successor

(For Use by Limited Liability Partnerships)

To file electronically:

- 1. Enter the information requested below and sign by typing your name in the signature field. The form can only be filled in using the free Adobe Acrobat Reader 9.1 or greater. (See the pages following this form for field by field instructions, and notes on delivery and processing of work requests.)
- 2. Click the "Add Attachments" button to add attachments if required (Check the field by field instructions to see if you must include an attachment(s)).
- 3. After the form has been filled in properly, please save a copy to your computer so that you can upload the form to the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application by following the instructions in the next step.
- 4. Click the "Open the Central Forms Repository Home Page to start the Form Submission Process" button at the bottom of the form.

(This action will launch the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application. If you have not created an account in the application, you will need to do so before using the online Web application. Once your account is created, please login to the application and follow the instructions for submitting your form and payment online.)

RE	: :		
	(Limited Liability Partnership)		
1.	In accordance with provisions of NJSA 42, I(Agent Name):		at
	(No. and Street) the address of the registered office of the above-	(City and State) named Limited Liability Partner	
	(State)		
DC	HEREBY DECLARE THAT:		
2.	I sent a copy of said resignation by certified mai	1 No	recorded at the Post
	Office of with return receipt requested to (City and State) being the last-known partner of said LLP known to me, at the address known to me at		
	(No. and Street) Certified mail was accepted by	(City and State)	(Zip) was not accepted.
3.	Attached is a copy of my resignation, mailed on		
4.	(Date) Service of notice of my resignation has not been made as required because: (Leave blank if not applicable)		
	It is understood that my resignation shall become effective upon 30 days after filing of the certificate with the Treasurer or upon designation by the LLP of a new registered agent, whichever is earlier.		
	(Signature of Resigning Agent)		ate)

Instructions for Form L-223

CERTIFICATION OF RESIGNATION OF REGISTERED AGENT WITHOUT A SUCCESSOR LIMITED LIABILITY PARTNERSHIPS

(Title 42)

STATUTORY FEE: \$25

The MANDATORY fields are:

Field #1 -- Business Name

List the LLP name as it appears on the records of the State Treasurer.

Field #1 -- Agent Name and Office

List the registered agent name and office as they appear on the records of the State Treasurer.

Field #1 -- State of Formation

List the state in which the LLP was formed.

Field #2 -- Declaration of Mailing

Add a statement that indicates that a copy of the resignation was sent via certified mail, return receipt required. Include the following information: certified mail number; post office form which mailing was done; mailing address (must be to last-known member or manager); and indication of whether the mailing was accepted or not. If the mailing was not accepted, provide an explanation. Form L-223 provides all of the necessary blanks and statements for these filing requirements.

Field #3 -- Date That Resignation Was Mailed

List the mailing date.

Field #4 -- ATTESTATIONS

Add a statement indicating an understanding that the resignation is effective upon the filing of the change form with the Treasurer, or upon the designation of a new agent/office by the affected LLP, whichever is earlier. Form L-223 provides the statement.

ATTACHMENTS

Attach a copy of the resignation.

EXECUTION

The resigning agent must sign. Also, list the date of execution (signature).
