

**LIMITED LIABILITY PARTNERSHIP (WINDING UP AND
DISSOLUTION) RULES, 2012**

Form No.5
[See sub-rule (4) of rule 8]

1. LLPIN

2. Name of the Limited Liability Partnership

3. Full address of the registered office of the Limited Liability Partnership

Line 1

Line 2

City District

State PIN Code

Country

4. SRN of delivering of the Declaration of solvency by
Designated Partner to the Registrar

5. Date of meeting of partners at which resolution for
voluntary winding up was passed

6. Date of forwarding copy of the declaration etc to the
creditors

7. Date of consent of creditors

8. Two third in value of Creditors of the LLP consented—
Yes

List of attachments

- (1) Copy of the
consent.

(2) Copy of the

Authority
(3) Optional
attachment.

Verification

To the best of my knowledge and belief, the information given in the form is correct and complete.

I have gone through the provisions of the Limited Liability Partnership Act, 2008, and the rules framed there under.

Copy of the consent is attached.

I have been authorized to sign and submit this application.

To be digitally signed by designated partner

DPIN

Dated:_____

Place:_____