

# **Arkansas Secretary of State**

1401 W. Capitol, Suite 250, Little Rock, AR 72201 501-682-3409 • www.sos.arkansas.gov

### **MEMORANDUM**

To: LLC Customers

From: Secretary of State - Business Services Division

Date: Permanent Reminder

Subject: Dissolution or Withdrawal

Please be reminded that corporations must file Franchise Tax Reports and pay applicable taxes for each year that they are considered filed with the Arkansas Secretary of State.

Pursuant to Arkansas Code Annotated § 26-54-105 (d)(1), every LLC that dissolves shall be required to pay at the time of dissolution the franchise tax for the prior calendar year and pay at the time of dissolution the minimum franchise tax for the year in which dissolved or withdrawn.

Failure to file the Final Tax Report with payment will result in the LLC's inability to dissolve or withdraw.

\* \* For further definition please feel free to contact a Business Services Representative at (501) 682-3409 or (888) 233-0325.

#### FOR OFFICE USE ONLY

## LIMITED LIABILITY COMPANY

## **FINAL FRANCHISE TAX REPORT**

To be submitted prior to Dissolution or Withdrawal

Secretary of State
Business and Commercial Services Division
1401 W. Capitol, Suite 250
Little Rock, Arkansas 72201
(501) 682-3409 or (888) 233-0325

File #	www.sos.arkansas.gov			
1.			1a.	
(Exact Limited Liability Company Name as Registered in Arkansas)			(Name)	
(Street and Number)			(Street and Number)	
(City State and ZIP Code)			(City State and ZIP Code)	
			Phone #	
	ease complete with current names		(Check One) Foreign Domestic	
·			e of Organization	
<u> </u>			e of Organization	
			5. Date of Organization in Arkansas	
Member/Manager		a. Aı	a. Arkansas Registered Agent	
Member/Manager		b. N	b. Nature of Business	
Member/Manager	ember/Manager 6. Fed		eral ID Number	
E-mail Address:				
Minimum Tax Due  Limited Liability Company\$150.00				
and belief. I understand	hat the statements made he	erein are	tatements are true to the best of my knowledge under oath, and that knowingly making a false a Class A misdemeanor (A.C.A. § 5-53-103), or	
State of County of		y of		
FILED this	day of		, ·	
(Remittance Must Accompany This Report)				
. ,	•			
Rev. 12/24  This form must be <i>signed</i> by: Member, Manager or Tax Preparer				