

**CERTIFICATE OF TERMINATION  
(TERMINATING THE EFFECT OF A PRIOR CERTIFICATE OR FILING  
WITH A FUTURE EFFECTIVE DATE)  
(WICHITA AND AFFILIATED TRIBES LLC)**

TO: Wichita Tax Commission  
P.O. Box 547  
Anadarko, OK 73005

1. Name & Address of Limited Liability Co.:

\_\_\_\_\_  
\_\_\_\_\_

2. Certificate or filing being terminated: \_\_\_\_\_

3. Date of Prior Filing: \_\_\_\_\_

4. I hereby certify that the effective date of the above-stated certificate or filing has not passed and,

a. \_\_\_\_\_ that conditions have changed enough to warrant termination if said certificate or filing; or

b. \_\_\_\_\_ that inaccuracies would result if such certificate or filing were not terminated.

5. I hereby request that the above-stated certificate or filing be terminated.

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name