



Attachment 2: Application for Termination of Liquidity Provider Status (Form 02/VL)

Applicant: \_\_\_\_\_

Date lodged: \_\_\_\_\_ Date received: \_\_\_\_\_  
(completed by Exchange)

**APPLICATION  
FOR TERMINATION OF LIQUIDITY PROVIDER STATUS  
AT LJUBLJANA STOCK EXCHANGE, INC.**

The following member firm is hereby applying to become a liquidity provider, in accordance with the Ljubljana Stock Exchange Inc. Rules:

**1. Applicant firm:** \_\_\_\_\_

**2. Firm registered address:** \_\_\_\_\_

**3. Firm Management Board:** \_\_\_\_\_

**4. Requested date of termination:** \_\_\_\_\_

**5. Securities subject to termination of liquidity provider status:**

	Security code (symbol)	Security issuer firm
1.		
2.		
3.		
4.		

**6. Reasons for resigning liquidity provider status:**

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

**7. Other relevant information** (provided by member firm insofar as relevant in given situation):

- a. expected date of last trading day: \_\_\_\_\_
- b. expiration date for contracts entered into with Ljubljana Stock Exchange \_\_\_\_\_

Agent of applicant: .....  
(name of agent)

.....  
(signature of agent and seal of issuer)