



**Wyoming Secretary of State**

Herschler Building East, Suite 101  
122 W 25<sup>th</sup> Street  
Cheyenne, WY 82002-0020  
Ph. 307.777.7311  
Email: [Business@wyo.gov](mailto:Business@wyo.gov)

For Office Use Only

**Decentralized Autonomous Organization  
Limited Liability Company  
Statement of Intent to Dissolve**

1. The name of the limited liability company is:  
*(Name must match exactly to the Secretary of State's records.)*

2. The following event as set forth in W.S. 17-31-114 has occurred: *(check one)*

The period fixed for the duration of the organization expired.

By vote of the majority of members of a member managed decentralized autonomous organization.

At the time or upon the occurrence of events specified in the underlying smart contracts or as specified in the articles of organization or operating agreement.

The decentralized autonomous organization has failed to approve any proposals or take any actions for a period of one (1) year.

3. Certification:

I understand that this entity shall be dissolved upon the processing of this document by the Wyoming Secretary of State's Office.

**Signature:** \_\_\_\_\_  
*(Shall be executed by a person authorized by the company.)*

**Date:** \_\_\_\_\_  
*(mm/dd/yyyy)*

Print Name:

Contact Person:

Title:

Daytime Phone Number:

Email:

*(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)*

**Checklist**

- Filing Fee: \$60.00** Make check or money order payable to Wyoming Secretary of State.
- The business entity is **active and in good standing** with this office.
- Processing time is up to 15 business days** following the date of receipt in our office.
- Please mail with payment to the address at the top of this form. **This form cannot be accepted via email.**
- Please review the form prior to submission. **The Secretary of State's Office is unable to process incomplete forms.**