

1. Corporation name:

Wyoming Secretary of State

Herschler Building East, Suite 101 122 W 25th Street Cheyenne, WY 82002-0020 Ph. 307.777.7311 Email: Business@wyo.gov

For Office Use Only

Profit Corporation Articles of Dissolution by Incorporators or Initial Directors

2. Date of incorporation:	um/dd/yyyy)
3. Check one box only.	im/ad/yyyy)
None of the shares have b	agan issued
OR	Jeen Issued.
The corporation has not c	commenced business.
4. No debt of the corporation remain	ns unpaid.
5. The net assets of the corporation were issued.	remaining after winding up have been distributed to the shareholders, if share
6. Check one box only.	
A majority of the incorpo	rators authorized the dissolution.
OR	
A majority of the initial d	lirectors authorize the dissolution.
Signature:	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.)

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.