

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845
corpinfo@state.sd.us

ARTICLES OF DISSOLUTION
DOMESTIC BUSINESS CORPORATION
SDCL 47-1A-1403

Please Type or Print Clearly in Ink

Please submit one **Original** and one **Photocopy**
FILING FEE: \$10 payable to SECRETARY OF STATE

1. The Name and Business ID of the corporation is:

Name (Note: This must be the exact corporate name as registered.)

Business ID

2. The date dissolution was authorized _____

3. If dissolution was approved by the shareholders, provide a statement that the proposal to dissolve was duly approved by the shareholders in the manner required by the South Dakota Business Corporation Act and by the corporation's Articles of Incorporation.

The application must be signed by an authorized officer of the corporation.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty (SDCL 47-1A-129; 22-39-36).

Dated _____

Signature of an authorized person

Email _____
(Optional)

Printed Name

Title