

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

**APPLICATION FOR
CERTIFICATE OF WITHDRAWAL
FOREIGN BUSINESS CORPORATION**
SDCL 47-1A-1520

FILING FEE: \$10

Make check 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 name of the state or other jurisdiction under whose laws it is incorporated: _____

3. The corporation is no longer transacting business in this state and it surrenders its authority to transact business in this state.

4. The corporation revokes the authority of its registered agent to accept service on its behalf.

5. The address of the corporation's principal office (this is the address of the executive offices of the company):

Street Address City State ZIP+4

Mailing Address if different from street address City State ZIP+4

Email Address (Optional)

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