

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

# APPLICATION FOR CERTIFICATE OF WITHDRAWAL FOREIGN NONPROFIT CORPORATION

Please Type or Print Clearly in Ink  
Please submit one **Original** and one **Photocopy**  
**FILING FEE: \$5** 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 doing or engaging in any business in this state and it surrenders its authority to transact business in South Dakota.

4. The corporation revokes the authority of its registered agent in your State to accept service of process, and consents that service of process in any action, suit or proceeding based upon any cause of action arising in your State during the time the corporation was authorized to transact business in your State may thereafter be made on the corporation by service thereof on the Secretary of State of your State.

5. The post-office address to which the Secretary of State may mail a copy of any process against the corporation that may be served is:

\_\_\_\_\_  
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 22-39-36).

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature of an authorized person

Email \_\_\_\_\_  
(Optional)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title