

The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Boston, Massachusetts 02108-1512

FORM MUST BE TYPED

Articles of Voluntary Dissolution of
Corporation Which Has Not Issued Shares
or Has Not Commenced Business
(General Laws Chapter 156D, Section 14.01; 950 CMR 113.40)

FORM MUST BE TYPED

(1) Exact name of corporation: _____

(2) Registered office address: _____
(number, street, city or town, state, zip code)

(3) Date of incorporation: _____

(4) The dissolution of the corporation was authorized as required by law by majority vote of:

(check appropriate box)

- the incorporators.
- the initial directors.

(5) The corporation has not:

(check appropriate box)

- issued any shares.
- commenced business.

(6) No debt of the corporation remains unpaid.

(7) If shares were issued, the net assets of the corporation that remained after winding up have been distributed to the shareholders.

(8) The dissolution of the corporation shall be effective at the time and on the date approved by the Division, unless a later effective date not more than 90 days from the date and time of filing is specified: _____

Signed by: _____
(signature of authorized individual)

- Chairman of the board of directors,
- President,
- Other officer,
- Court-appointed fiduciary,

on this _____ day of _____, _____.

COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Boston, Massachusetts 02108-1512

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or Has Not Commenced Business**
(General Laws Chapter 156D, Section 14.01; 950 CMR 113.40)

I hereby certify that upon examination of these articles of voluntary dissolution, duly submitted to me, it appears that the provisions of the General Laws relative to the organization of corporations have been complied with, and I hereby approve said articles; and the filing fee in the amount of \$ _____ having been paid, said articles are deemed to have been filed with me this _____ day of _____, 20____, at _____ a.m./p.m. _____
time

Effective date: _____
(must be within 90 days of date submitted)

WILLIAM FRANCIS GALVIN
Secretary of the Commonwealth

Examiner

Filing fee: \$100

#A.R.

TO BE FILLED IN BY CORPORATION
Contact Information:

Telephone: _____

Email: _____

Upon filing, a copy of this filing will be available at www.sec.state.ma.us/cor.
If the document is rejected, a copy of the rejection sheet and rejected document will be available in the rejected queue.