

DOCUMENT AND CERTIFICATE COVER SHEET

Contact Information		
Name:		
Mailing Address:		
Email Address:		
Phone Number:		
Request for Filing of Document		
Exact Name of Entity:		
Document Type:	mendment, etc.):	
	. ,	
Request for Copies or Certificates of Status (Check the appropriate box)		
Exact Name of Entity:		
□ Certified Copies of all Documents on File (\$10 per document)		
□ Plain Copies of all Documents on File (\$5 per document)		
Certified Copy of	(\$10 per document)	
(specify document)		
Plain Copy of	(\$5 per document)	
(specify document)		
Certificate of Status - Long Form (\$25 per document)		
Certificate of Status - Short Form (\$25 per document)		
Method of Delivery of Filing Receipt or Other Document		
All documents will be returned to the email address listed above with the exception of certified and uncertified copies filed before July 1990.		



Division of Corporations, State Records and Uniform Commercial Code

CERTIFICATE OF DISSOLUTION OF

(Insert Name of Corporation)

Under Section 1003 of the Business Corporation Law

FIRST: The name of the corporation is:

If the name of the corporation has been changed, the name under which it was formed is:

SECOND: The certificate of incorporation was filed with the Department of State on:

THIRD: The name and address of each officer and director of the corporation is:

FOURTH: (Check the statement that applies)

The dissolution was authorized at a meeting of shareholders by two-thirds of the votes of all outstanding shares entitled to vote.

The dissolution was authorized at a meeting of shareholders by a majority of the votes of all outstanding shares entitled to vote.

The dissolution was authorized by the unanimous written consent of the holders of all outstanding shares entitled to vote without a meeting.

FIFTH: The corporation elects to dissolve.

X	
(Signature)	

(Print or Type Name of Signer)

(Print or Type Title of Signer)

CERTIFICATE OF DISSOLUTION OF

(Insert Name of Corporation)

Under Section 1003 of the Business Corporation Law

Filer's Name and Mailing Address:

Name:

Company, if Applicable:

Mailing Address:

City, State and Zip Code:

NOTES:

- 1. The name of the corporation and its date of incorporation must be exactly as they appear on the records of the <u>Department of State</u>. This information should be verified on the Department of State's web site at <u>https://dos.ny.gov.</u>
- 2. This certificate must be signed by an officer, director or duly authorized person.
- 3. Attach the consent of the NYS Department of Taxation and Finance.
- 4. Attach the consent of the New York City Department of Finance, if required.
- 5. The fee for filing this certificate is \$60, made payable to the Department of State.

For DOS Use Only