



ARTICLES OF DISSOLUTION BY DIRECTORS OR INCORPORATORS OF A NONPROFIT CORPORATION

State Form 35228 (R9 / 8-17) / Corporate Form 107-A
Approved by State Board of Accounts, 2017

SECRETARY OF STATE
BUSINESS SERVICES DIVISION
302 West Washington Street, Room E018
Indianapolis, IN 46204
Telephone: (317) 232-6576
www.sos.in.gov

- INSTRUCTIONS:
1. Use 8½" x 11" white paper for attachments.
 2. Please **TYPE** or **PRINT** in **INK**.
 3. Please visit our office on the web at www.sos.IN.gov
 4. Make check or money order payable to the Secretary of State.
 5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business
E-mail address of business (SOS use only)

RETURN DOCUMENTS TO:

Name		
Street address, line 1		
Street address, line 2		
City	State	ZIP code
Telephone number ()	E-mail address (If different from above – SOS use only)	





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Indiana Code 23-17-22-1
23-0.5-9-17

FILING FEE: \$30.00

The undersigned, desiring to effectuate the dissolution of _____
(hereinafter referred to as the "Corporation"), existing pursuant to the provisions of the Indiana Nonprofit Corporation Law as amended, hereby certifies
the following facts:

1. Date of Incorporation is (*month, day, year*): _____;
2.
 - a. No membership in the Corporation has been issued; and / or
 - b. The Corporation has not commenced business;
3. No debt of the Corporation remains unpaid; and
4. The majority of the incorporators or initial directors authorized the dissolution.

In witness whereof, the undersigned being the Incorporator(s) or Initial Director(s) of the Corporation, hereby executes
this certificate and verifies, subject to penalties of perjury, that the statements contained herein are true,
this _____ day of _____, 20_____.

Signature

Printed name

Title