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KANSAS SECRETARY OF STATE Certificate of Dissolution Prior to Commencing Business All information on this form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

## GENERAL FILING INSTRUCTIONS

Filing fee	The filing fee for this document is <b>\$35.</b>		
Payment	Please submit payment by check, money order, or credit card. Checks and money orders need to be made payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. <b>Please do not send cash.</b>		
	Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:		
	Credit card number		
	Billing zip code Expiration date		
	NOTICE: There is a \$25 service fee for all returned checks.		
Daytime phone and contact person			
Signature	This form must be signed by a majority of the incorporators, or if directors were named in the Articles of Incorporation or have been elected, by a majority of the directors.		

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KANSAS SECRETARY OF STATE Certificate of Dissolution Prior to Commencing Business



## Kansas Office of the Secretary of State:

Memorial Hall, 1st Floor 120 S.W. 10th Avenue Topeka, KS 66612-1594 (785) 296-4564 kssos@sos.ks.gov https://sos.ks.gov

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3. The business or activity for which the corporation was organized has not begun.

No part of the capital of the corporation has been paid, or if some capital has been paid, that the amount actually paid in for the corporation's shares, less any part thereof disbursed for necessary expenses, has been returned to those entitled to it.

All issued stock certificates, if any, have been surrendered and cancelled.

All rights and franchises of the corporation are hereby surrendered.

4. I/We declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct, and that I/we have remitted the required fee.

Signed by a majority of directors or incorporators:

Month	Day	Year	
Name of Signer (Printed or Typed)			
Month	Day	Year	
Name of Signer (Printed or Typed)			
Month	Day	Year	
Name of Signer (Printed or Typed)			
	Month	Month Day	