COMPLETE, PRINT, SIGN, AND MAIL OR FAX (If paying with credit card, complete Credit Card Payment Authorization)

NONPROFIT CORPORATION INTENT TO DISSOLVE

SECRETARY OF STATE

SFN 58782 (12-2012)

FOR OFFICE USE ONLY

ID Number	
Work Order Number	
Filed	By

NOTE: The filing of the Intent to Dissolve is not the dissolution of the corporation. If the Articles of Dissolution are not filed by the time the next annual report is due, the corporation must file the annual report to avoid involuntary dissolution for failure to report.

1. FILING FEE: $10.00

For reference, see N.D.C.C. Section 10-33-99

TYPE OR PRINT LEGIBLY **SEE INSTRUCTIONS FOR FEES, FILING AND MAILING INFORMATION.**

2. Name of Corporation	3. Federal ID Number

4. Check the appropriate box and complete the selected statement that defines the manner in which the board adopted the resolution to dissolve.

"The required approval of the directors was received for the resolution to dissolve: (check one of the following boxes)

☐ By teleconference held on the following date (month, day, year): _____

☐ By written action; or

☐ In a meeting held on the following date (month, day, year): _____ at

Complete Address of Place Where Meeting was Held

5. Complete Section A or B which defines the manner in which voting members adopted the resolution to dissolve.

"Regarding the resolution to dissolve by members with voting rights: (complete A or B)

☐ A. There are no members with voting rights

OR

☐ B.The required approval of the members with voting rights was received for the resolution to dissolve: (check one of the boxes)

☐ By teleconference held on the following date (month, day, year): _____

☐ By written action; or

☐ In a meeting held on the following date (month, day, year): _____ at

Complete Address of Place Where Meeting was Held

6. "The undersigned, a person authorized by the corporation to sign this Intent to Dissolve:

- Authorizes the Secretary of State to correct number 2 if not correctly reflected.
- Has read the foregoing statement, knows the contents thereof, and believes the statements made to be true.
- Understands that if I make a false statement in this document, I may be subject to criminal penalties."

Signature		Date
7. Name of Person to Contact about this Document	Email Address	Daytime Telephone Number and Extension, if any

INSTRUCTIONS FOR NONPROFIT CORPORATION INTENT TO DISSOLVE

According to N.D.C.C. Section 10-33-99, a nonprofit corporation must file an Intent to Dissolve with the Secretary of State when the corporation is being dissolved by the board, or by the board and members with voting rights.

The filing of the Intent to Dissolve is not the dissolution of the corporation. Articles of Dissolution must be filed to finally dissolve the corporation. The form for Articles of Dissolution is available from the Secretary of State's website, or contact the Secretary of State.

The following instructions correspond to the numbered sections on the form.

1. **FILING FEE:** The filing fee is $10.00. Checks must be made payable to the Secretary of State and must be for United States negotiable funds. Payments may also be made by credit card using VISA, MasterCard, or Discover.
2. Provide the corporate name exactly as currently provided in the Articles of Incorporation, or as last amended and filed with the Secretary of State. Pay attention to punctuation and abbreviations. If the name in number 2 is not the same as registered, the name will be corrected by the Secretary of State when the document is reviewed.
3. To properly maintain corporate records, the Federal ID number is requested if the corporation has one.

   PRIVACY: In compliance with N.D.C.C. Section 10-33-142.1, social security or Federal ID numbers are not disclosed to the public. They are used by the Secretary of State to maintain accurate corporate files. Therefore, while voluntary disclosure is requested, failure to do so will not result in rejection of the document.
4. Check the box that best describes how the board adopted the resolution to dissolve.

5A. Check the box if the corporation has no voting members and members did not adopt a resolution to dissolve.

5B. If there are voting members, check the box that best describes how the voting members voted on the resolution to dissolve.

6. This document must be signed and dated by an individual authorized by the corporation.
7. Provide the name, email address, and daytime telephone number of a contact person if this office has any questions or needs additional information to file the Intent to Dissolve. The email address is not disclosed to the public; this information is privatized in accordance with N.D.C.C. Section 44-04-18.21.

ANNUAL REPORTS: The filing of the Intent to Dissolve is not the dissolution of the corporation. If the Articles of Dissolution are not filed by the time the next annual report is due, the corporation must file the annual report to avoid involuntary dissolution for failure to report.

ASSISTANCE: If assistance is required to complete the Intent to Dissolve, call 701-328-2904.

FAX FILING: Documents and Credit Card Payment Authorization may be faxed to 701-328-2992. A faxed filing does not expedite the process of the documents in the office of the Secretary of State.

EMAIL: Email is not a secure utility for the transmission of private information or credit card authorizations. **DO NOT EMAIL YOUR DOCUMENT TO THE SECRETARY OF STATE.**

MAILING INSTRUCTIONS: Send Intent to Dissolve and fee to:

Secretary of State
State of North Dakota
600 E Boulevard Ave Dept 108
Bismarck ND 58505-0500

Telephone: 701-328-2904 Toll Free: 800-352-0867 (ext. 328-2904) Fax: 701-328-2992 Web Site: www.nd.gov/sos

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CREDIT CARD PAYMENT AUTHORIZATION

SECRETARY OF STATE
SFN 51478 (4-2012)

(All items required to complete transaction)

			Amount Authorized
Name			Telephone Number
Address	City	State	ZIP Code
☐ VISA ☐ MasterCard ☐ Discover			Signature (Required by Credit Card Companies)
Account Number	CSC Number *	Card Expires Month - Year	Date

* (CSC is the three-digit security code on the back of your card by the signature)