

ARTICLES OF REVOCATION

OF DISSOLUTION

Business Corporation Act

Secretary of State
Department of Business Services
Springfield, IL 62756
217-782-6961
www.cyberdriveillinois.com

Remit payment in the form of a
check or money order payable
to Secretary of State.

File # _____ Penalty \$ _____ Filing Fee: \$5 Total \$ _____ Approved: _____

----- **Submit in duplicate** ----- **Type or Print clearly in black ink** ----- **Do not write above this line** -----

1. Corporate Name: _____

2. Date Articles of Dissolution were filed: _____, _____
Month & Day Year

3. The Corporation has not begun to distribute its assets and has not commenced a proceeding for court supervision of its winding-up.

4. Date resolution revoking the dissolution was adopted: _____, _____
Month & Day Year

NOTE: The date in this item must be within 60 days of the date in item 2.

By a majority of the incorporators, no shares having been issued and no directors having been named in the Articles of Incorporation nor elected by the incorporators, as of the time this action was taken.

By a majority of the board of directors.

5. The undersigned Corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct. All signatures must be in **BLACK INK**.

If the action was taken by the board of directors, sign as follows below.

Dated _____, _____
Month & Day Year Exact Name of Corporation

Any Authorized Officer's Signature

Name and Title (type or print)

**If the action was taken by the incorporators, a majority of them must sign below and type or print names.
The undersigned, under penalties of perjury, affirm(s) that the facts stated herein are true and correct.**

Dated _____, _____
Month & Day Year Exact Name of Corporation

By _____

NOTE: These articles are accompanied by all delinquent report forms, if any, together with the filing fees, franchise taxes, penalties and interest required.