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For Office Use Only

Profit Corporation Articles of Dissolution by Shareholders

1. Corporation name:

2. Date dissolution was authorized:

(Date – mm/dd/yyyy)

3. **Approval of the dissolution.** *(Check the box to indicate that the dissolution was approved by the shareholders.)*

The proposal to dissolve was duly approved by the shareholders in the manner required by this act and by the articles of incorporation.

Signature: _____
(May be executed by Chairman of the Board, President or another of its officers.)

Date: _____
(mm/dd/yyyy)

Print Name:

Contact Person:

Title:

Daytime Phone Number:

Email:

*(Email provided will receive filing evidence)
 May list multiple email addresses

Checklist

Filing Fee: \$50.00 Make check or money order payable to Wyoming Secretary of State.
 Please submit one **originally signed** document.
Typical processing time is 3-5 business days following the date of receipt in our office.
 Please review form prior to submitting to the Secretary of State to ensure all areas have been completed to avoid a delay in the processing of your documents.