



State of Alaska
Division of Corporations, Business and Professional Licensing
CORPORATIONS SECTION
PO Box 110806
Juneau, AK 99811-0806
Phone: (907) 465-2550
Fax: (907) 465-2974
Website: www.commerce.alaska.gov/occ

NOTIFICATION OF CONSOLIDATION

Foreign Nonprofit Corporation

AS 10.20.266 – 10.20.275

Filing Fee: \$25.00 (non-refundable)

INSTRUCTIONS (*Please retain for your records*):

NOTICE: The Notification of Consolidation will not be filed if a biennial report is due or the signatures do not match what the Corporations Section has on record. Please verify the following before completing the application.

- Have all current biennial reports be filed?
- Are the officers/directors up to date on our records?

To verify this information please search for the entity by going to Search Corporations Database in the Corporations Section of our website at www.commerce.alaska.gov/occ. If there is a biennial report due, the report may be filed online by selecting Biennial Reports on the Corporations Section page. If the officers/directors have changed, but no biennial report is due, please submit a Notice of Change located in the Forms and Fees section.

Refer to Alaska Statutes 10.20.266 – 10.20.275. One or more foreign corporations and one or more domestic corporations may be merged or consolidated in the manner provided in AS 10.20.271 and 10.20.275 if the merger or consolidation is permitted by the laws of the state under which each foreign corporation is organized.

ITEM 1: Provide the name(s) and, if applicable, the Alaska Entity Number(s) of the consolidating entities.

ITEM 2: Provide the name and of the new entity. If the resulting entity will be transacting business in the State of Alaska, an application for Certificate of Authority must be filed.

ITEM 3: A certified copy of the Articles of Consolidation filed in the home state must be attached.

NOTE: If the surviving or new entity is governed by the laws of another state and is going to transact business in this state, it shall comply with the provisions of the Alaska Corporations Code (AS 10.06) with respect to foreign corporation and submit a Certificate of Authority to this office.

Mail the Notification of Consolidation and the non-refundable \$25.00 filing fee in U.S. dollars to:
State of Alaska, Corporations Section, PO Box 110806, Juneau, AK 99811-0806

STANDARD PROCESSING TIME for complete and correct applications submitted to this office is approximately 10-15 business days. All applications are reviewed in the date order they are received.



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DO NOT STAMP ABOVE THIS BOX

Office Use Only **CORP**

NOTIFICATION OF CONSOLIDATION
Foreign Nonprofit Corporation
AS 10.20.266 – 10.20.275

\$25.00 Filing Fee (non-refundable)

Pursuant to Alaska Statutes 10.20.266 – 10.20.275, one or more foreign corporations and one or more domestic corporations may be merged or consolidated in the manner provided in AS 10.20.271 and 10.20.275 if the merger or consolidation is permitted by the laws of the state under which each foreign corporation is organized. If the resulting entity will be transacting business in the State of Alaska, an application for Certificate of Authority must be filed.

ITEM 1: Name of the consolidating entity:	Alaska Entity # (if applicable):
<input type="text"/>	<input type="text"/>

Name of the consolidating entity:	Alaska Entity # (if applicable):
<input type="text"/>	<input type="text"/>

Attach a separate sheet with additional entities, if necessary.

ITEM 2: Name of the new entity:

ITEM 3: A certified copy of the Articles of Consolidation filed in the home state must be attached.

NOTE: If the surviving or new entity is governed by the laws of another state and is going to transact business in this state, it shall comply with the provisions of the Alaska Corporations Code (AS 10.06) with respect to foreign corporation and submit a Certificate of Authority to this office.

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CONTACT INFORMATION SHEET

Please return this document with your filing. This information will only be used to resolve questions with the filings attached. **NOTE:** this form will not be filed for record or appear online.

Name of entity as it appears on filing:

To resolve questions with this filing, contact:

Name:	
Email:	Phone:
Mailing address:	

Return documents to:

Name:
Company:
Mailing address:

Attach this form to your filings. Send all documents to:
State of Alaska, Corporations Section, PO Box 110806, Juneau, AK 99811-0806

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THE STATE
of **ALASKA**
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

FOR DIVISION USE ONLY

State of Alaska
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
PO Box 110806, Juneau, AK 99811
Phone: (907) 465-2550

Credit Card Payment Form

All major credit cards are accepted. For security purposes, do not email credit card information. Include this credit card payment form with your application.

Name of Applicant or Licensee: _____

Program Type: _____ License Number (if applicable): _____

I wish to make payment by credit card for the following (check all that apply):

- | | AMOUNT |
|--|---------------|
| <input type="checkbox"/> Application Fee: _____ | _____ |
| <input type="checkbox"/> License or Renewal Fee: _____ | _____ |
| <input type="checkbox"/> Other (name change, wall certificate, fine, duplicate license, exam, etc.): | |
| 1. _____ | _____ |
| 2. _____ | _____ |

TOTAL: _____

Name (as shown on credit card): _____

Mailing Address: _____

Phone Number: _____ Email (optional): _____

Signature of Credit Card Holder: _____

08-4438

Rev 12/26/18

Credit Card Payment Form (all major cards accepted)

CREDIT CARD INFO: Your payment cannot be processed unless all fields are completed!	
<p>1. Account Number: _____</p> <p>2. Expiration Date: _____</p> <p>3. Billing ZIP Code: _____</p> <p>4. Security Code: _____</p>	<p>All four fields MUST be completed!</p> <p>This section will be destroyed after the payment is processed.</p>