



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

CERTIFICATE OF WITHDRAWAL

Foreign Business Corporation

AS 10.06.780

Filing Fee: \$25.00 (non-refundable)

INSTRUCTIONS (*Please retain for your records*):

NOTICE: The Certificate of Withdrawal 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/shareholders 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/shareholders 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 10.06.780. Pursuant to Alaska Statutes 10.06.780, a foreign corporation may apply for a Certificate of Withdrawal. If you need assistance in completing your filing, it is advised that you seek legal counsel. Please be aware that this filing will become public information.

ITEM 1: Provide the name of the entity currently on record and the Alaska Entity Number.

ITEM 2: Provide the state or country of domicile where the corporation has filed their Articles of Incorporation.

ITEM 3-6: These are standard statements required by statute. Please read through and verify.

ITEM 7: Provide the mailing address where the commissioner may mail any service of process against the corporation.

ITEM 8: The Application of Withdrawal must be signed by the corporation's president or vice president and by the secretary or assistant secretary.

Mail the Certificate of Withdrawal 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

CERTIFICATE OF WITHDRAWAL
Foreign Business Corporation
AS 10.06.780

\$25.00 Filing Fee (non-refundable)

Pursuant to Alaska Statutes 10.06.780, the undersigned corporation applies for a Certificate of Withdrawal.

ITEM 1: Name of the Entity:	Alaska Entity #:

ITEM 2: State or country of domicile:

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ITEM 3: The Corporation is not transacting business in Alaska.

ITEM 4: The Corporation surrenders its authority to transact business in Alaska.

ITEM 5: The Corporation hereby revokes its authority to transact business in Alaska.

ITEM 6: The Corporation hereby revokes the authority of its registered agent in Alaska and consents that service of process may subsequently be made on the company by service of the Commissioner.

ITEM 7: The mailing address where the Commissioner may mail any service of process against the corporation:

Name:
Physical address:
Mailing address:

ITEM 8: The Application of Withdrawal must be signed by the corporation's president or vice president and by the secretary or assistant secretary.

Signature of President or Vice President	Printed name of President or Vice President	Date
Signature of Secretary or Assistant Secretary	Printed name of Secretary or Asst. Secretary	Date

Mail the Certificate of Withdrawal and the non-refundable \$25.00 filing fee in U.S. dollars to:
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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:
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