

Telephone: 877.767.3453

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Filing Form Cover Letter

Please return the approval certificate to:

Name (Individual or Bu	usiness Name):			
To the Attention of	of (if necessary):			
Address:				
City:				
State		lacksquare	ZIP Code:	
Phone Number:		E-mail Address:		
Business Services Check here if you	. would like to be signed up for	or our Filing Notification Sy	he Ohio Secretary of State's offi stem for the business entity bei a email when any document is f	ing created or
	or money orders payable to eing Requested: (PLE	_		
_	proximately 3-7 business		rm is required and the filing time may vary based on th	_
			n addition to the regular fings after it is received by ου	
O one of the form,	the filing will be process	ed within 1 business da	n addition to the regular fi by after it is received by our ne document to the Client S	office. This
one of the form,	the filing will be processed	ed within 4 hours after i	n addition to the regular fi t is received by our office, i eliver the document to the C	if received by 1:00

Preclearance will be complete within 1-2 business days.

Preclearance Filing: A filing form, to be submitted at a later date for processing, may be submitted to be examined for the purpose of advising as to the acceptability of the proposed filing for a fee of \$50.00. The

Form 561 Prescribed by:



Telephone: 877.767.3453

OhioSoS.gov

business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

For screen readers, follow instructions located at this path.

Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 1329 Columbus, OH 43216

Expedite Filing (Two business day processing time. Requires an additional \$100.00)

P.O. Box 1390 Columbus, OH 43216

Certificate of Dissolution

(For-Profit, Domestic Corporation)
Filing Fee: \$50
Form Must Be Typed

Complete the following information	1.			
The corporation named below has	s adopted a resolution of diss	solution.		
Name of Corporation				
Charter Number				
Location of Principal Office in Ohi	io			
City		C	County	OH State
The internet address of each dom	nain name held or maintained	by or on behalf	of the corporation:	

The corporation did not hold or maintain any domain names.

Name and address of	of the S	Statutory A	gent.								
Name of Statuto	ry Age	ent									
Mailing Address											_
City								OH State		ZIP Code	
Please complete this	s secti	tion if the co	•								
			Aco	ceptance	of App	ointme	ent				
The Undersigned,	(Name	e of Statutory A	gent)							, named herein	as the
Statutory agent for	(Name	e of Corporation	n)								
hereby acknowledge	es and	accepts the	appointme	ent of statut	tory agen	t for said	corpo	ration.			
Statutory Agent Sigr	nature		ent's Signatu	re / Signature	on Behalf o	of Business	Serving	g as Agent)			
The date of dissolut	ion if c	other than	the filing d	late (MM/DD)/YYYY)						
Note: The date of dis of filing, pursuant to						ter date	that is	s not mo	ore than	ı 90 days after t	ne date
Pursuant to Ohio R section 1701.87(B)								-	-		

Page 3 of 9 Last Revised: 02/2023

(1.)	section 1701.86(C), if an initial stated capital was begins business, or if an initial stated capital is	e Incorporators . Pursuant to Ohio Revised Code as not set forth in the articles then before the corporation set forth in the articles then before subscriptions to of that initial stated capital, the incorporators or a by them, a resolution of dissolution. (138-DISI)
The n	names and addresses of all the incorporators must	be set forth below:
Name	ne	Address
		7 tauroso
Name	ne	Address
Name	ne	Address
		krupt or has made a general assignment for the benefit of
(the creditors;	en appointed in a general creditor's suit or in any suit in
(When substantially all of the assets have beer 	•
(When the articles have been canceled for failu	re to file annual franchise or excise tax returns or for ecorporation has not been reinstated or does not desire to
(When the period of existence of the corporation	n specified in its articles has expired.
((150-DISS)	
] (3.) T	The articles are hereby dissolved by the Sharehol	ders pursuant to Ohio Revised Code section 1701.86(E).
(Note: Pursuant to Ohio Revised Code section of corporations must attach to this filing a Certific Department of Taxation.	

Form 561 Page 4 of 9 Last Revised: 02/2023

By signing and submitting this formula the requisite authority to execute the second s	m to the Ohio Secretary of State, the undersigned hereby certifies that he or she ute this document.
Required	
When the resolution is adopted by the incorporators, the certificate shall be signed by	Signature
not less than a majority of the incorporators.	By (if applicable)
In all other cases, the certificate shall be signed by any authorized	
officer, unless the officer fails to execute and file such a certificate within 30 days after the date upon which such	Print Name
certificate is to be filed. In the latter event, the certificate may be signed	Signature
by any three (3) shareholders or, if there are less than three (3) shareholders, all of the shareholders, form a statement that the persons	By (if applicable)
signing the certificate are shareholders and are filing the certificate because of the failure of the officers to do so.	Print Name
If authorized representative is an individual, then they must sign in the "signature" box and print their name	Signature
If authorized representative is a business entity, not an individual, then places print	By (if applicable)
individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.	Print Name

Notice of Dissolution to Creditors and Claimants against Corporation (pursuant to ORC 1701.87)

Notic	f Dissolution of
	Name of Corporation
Name	Corporation
corpc occur 1.	corporation (the "corporation") has dissolved. You must present to the corporation any claim against the ion, including any claim by a creditor or any claim that is conditional, unmatured, or contingent upon the ace or nonoccurrence of future events, pursuant to the following: claims shall be presented in writing and shall identify the claimant and contain sufficient information to asonably inform the corporation of the substance of the claim. e mailing address to which the person must send the claims is:
	Idress
	ty State Zip Code
	e deadline by which the corporation must receive the claim is sixty (60) days after the date this notice is en (the "Deadline").
4.	e claim will be barred if the corporation does not receive the claim by the deadline.

The corporation may make distributions to other creditors or claimants, including distributions to shareholders of

the corporation, without further notice to the claimant.

Complete the information in this section.

AFFIDAVIT

In li	eu of dissolution releases	from various governmental author	ities.	
Name of Corporation The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1701.95 of the ORC.				
Agency Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	Date Notified (MM/DD/YYYY)	Agency Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319	Date Notified (MM/DD/YYYY)	
* Only required for domestic for-profit cor	porations	Overnight Address: P.O. Box 182413 Columbus, OH 43218-2413	Regular Address : P.O. Box 182413 Columbus, OH 43218-2413	

	The corporation is not required to pay or the department of taxation has not assessed any personal property tax.
Note: This affidavit must be signed by the person e	executing the certificate or by an officer of the corporation.
Signature	Title
Name	
Mailing Address	
The limit of the l	
City	State ZIP Code
State of	
County of	
Sworn to or affirmed and subscribed before me by	
	Name of person making oath or affirmation
on this date	
NOTARY SEAL	Today's Date (MM/DD/YYYY)
	Notary Public's Signature
	Expiration Data of Natory's Commission (MM/DDA/A/A)

Form 561 Last Revised: 02/2023 Page 7 of 9

AFFIDAVIT OF PERSONAL PROPERTY

State of	
County of	
	_
Name of Officer	
Nume of Officer	
Title of Officer	of Name of Corporation
Title of Officer	Name of Corporation
and that this affidavit is made in compliance with	Ohio Revised Code Section
That above named somewhich (Obselvana)	
That above-named corporation: (Check one (
☐Has no personal property in any cou	
☐ Is the type required to pay personal p	property taxes to state authorities only
☐Has personal property in the followin	g county (ies)
▼	•
County	County
Signature	Title
Sworn to or affirmed and subscribed before me by	Name of person making oath or affirmation
on this date	
NOTARY SEAL	Today's Date (MM/DD/YYYY)
	Notary Public's Signature
	Notary i abilit o digitature
	Expiration Date of Notary's Commission (MM/DD/YYYY)

Instructions for Certificate of Dissolution

This form should be used for a for-profit, domestic corporation to file a certificate of dissolution pursuant to Ohio Revised Code section 1701.86.

Corporation Information

Please provide the name of the corporation and the charter number assigned by our office.

Also, please provide the location of the principal office in Ohio including the city and county.

Internet Address Information

Please provide the internet address of any domain name held or maintained on behalf of the corporation. If the corporation did not hold or maintain any domain name, please indicate so by checking the box.

Statutory Agent Information

Please provide the name and address of the statutory agent.

Date of Dissolution

Pursuant to Ohio Revised Code section 1701.86(F)(7), the date of dissolution must be on the date of filing with our office, or a later date specified that is not more than 90 days after the date of filing.

Notice of Dissolution

Please attach a copy of the notice provided by the corporation, as required by the Ohio Revised Code section 1701.87(B), or complete the notice form on page 5.

Certificate of Tax Clearance

Pursuant to Ohio Revised Code section 1701.86(H)(2), domestic for-profit corporations must obtain a Certificate of Tax Clearance from the Department of Taxation to submit with this form.

Statement of Manner and Basis for Dissolution

Pursuant to Ohio Revised Code section 1701.86(F)(3), the certificate must provide a statement of the manner of adoption of the resolution of dissolution, and in the case of its adoption by the incorporators or directors, a statement of the basis of the adoption. Please check the appropriate box to state the resolution of adoption was adopted by the Incorporators, Directors or Shareholders. If adopted by Incorporators, please provide the names and addresses of all the incorporators. If adopted by Directors, please check one of the five boxes to state the basis for the adoption, as stated in Ohio Revised Code section 1701.86(D).

Additional Provisions

If the information you wish to provide for the record does not fit on the form, please submit additional provisions on a single-sided, $8 \frac{1}{2} \times 11$ sheet(s) of paper.

Signature(s)

After completing all information on the filing form, please make sure that page 4 is signed by the incorporators or a majority of them, if dissolved by incorporators. If dissolved by directors or shareholders, the dissolution must be signed by an authorized officer.

**Note: Our office cannot file or record a document which contains a social security number or tax identification number. Please do not enter a social security number or tax identification number, in any format, on this form.