



STATE OF NEW MEXICO

**MAGGIE TOULOUSE OLIVER**

SECRETARY OF STATE

## **Domestic Nonprofit Dissolution Application Checklist**

The attached application must be filled out in its entirety. All fields with an asterisk \* are required.

The filing fee is \$10. Please make the check or money order payable to New Mexico Secretary of State or NMSOS.

Mail entire application along with the required information listed above to:

### **New Mexico Secretary of State**

Business Services Division

325 Don Gaspar, Suite 300

Santa Fe, NM 87501

Type or Print Legibly  
\$10 Filing Fee



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## Nonprofit Corporation Articles of Dissolution

The undersigned, acting with authority pursuant to the provisions of the New Mexico Nonprofit Corporation Act, adopts the following Articles of Dissolution:

**Article One:** \*The business ID number, name, and DBA name(s) of the company:

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**Article Two:** \*Please select the applicable option and provide the corresponding date.

A meeting of members, at which the resolution to dissolve was adopted, took place on: \_\_\_\_\_

A quorum of the members entitled to vote was present and the amendment received at least two-thirds of the votes which members present at the meeting or represented by proxy were entitled to cast, or the resolution was adopted by a consent in writing signed by all members entitled to vote.

**OR**

A meeting of the board of directors, at which the resolution was adopted, took place on: \_\_\_\_\_

The corporation has no members, or no members entitled to vote thereon. Therefore the resolution to dissolve was adopted by a majority vote of the board of directors in the office.

**Article Three:** Please select the applicable option

A copy of the plan of distribution as adopted by the corporation is attached.

**OR**

No plan of distribution was adopted.

**Article Four:** All debts, obligations and liabilities of the corporation have been paid and discharged or adequate provision has been made. Therefore, all remaining property and assets of the corporation have been transferred, conveyed or distributed in accordance with the provisions of the Nonprofit Corporation Act. There are no suits pending against the corporation in any court, or adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

**Article Five:** \*I confirm that the corporation has resigned as registered agent or is not currently a registered agent for any entity registered in New Mexico

\*Executed Date:

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\*Signature of Officer

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\*Printed Name and Title

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325 DON GASPAR, SUITE 300 | SANTA FE, NEW MEXICO 87501  
PHONE: (505) 827-3600 or (800) 477-3632 | FAX: (505) 827-8081  
WWW.SOS.STATE.NM.US



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## Document Delivery Instruction Form

Please fill out in its entirety

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Attention: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip code

Email Address: \_\_\_\_\_

**All documents will be emailed to the email address listed. If an email address is not provided the documents will be mailed to the address listed.**

check if you choose to pick up your documents

Documents listed for pick up must be picked up within five business days or documents will be emailed.

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