FILING FEE: $50.00

PRINT CLEARLY

OKLAHOMA
CERTIFICATE OF DISSOLUTION

TO: OKLAHOMA SECRETARY OF STATE
2300 N. Lincoln Blvd., Room 101, State Capitol Building
Oklahoma City, Oklahoma 73105-4897
(405) 521-3912

The undersigned, for the purpose of dissolving said corporation pursuant to Section 1096 of the Oklahoma General Corporation Act, hereby certifies:

1.   The name of the corporation is:

2.   The date of incorporation of such corporation is: _____

3.   The name of its registered agent and the street address of its registered office in the State of Oklahoma is:

Name	Street Address	City	County	Zip Code
	(P.O. BOXES ARE NOT ACCEPTABLE)			

4.   The date dissolution was authorized: _____

5.   Check the applicable statement:

_____ The dissolution has been authorized by the board of directors and shareholders of the corporation in accordance with subsections A & B of Section 1096.

OR

_____ The dissolution has been authorized by all of the shareholders of the corporation entitled to vote on a dissolution in accordance with subsection C of Section 1096.

6. The names and addresses of its officers are:

	NAME	ADDRESS	CITY	STATE	ZIP CODE
PRESIDENT					
VICE PRESIDENT					
SECRETARY					
ASST. SECRETARY					
TREASURER					

7. The names and addresses of its directors, if any, are:

	NAME	ADDRESS	CITY	STATE	ZIP CODE
DIRECTOR					
DIRECTOR					
DIRECTOR					

IN WITNESS WHEREOF, said corporation has caused this certificate of dissolution to be executed this _____ day

of _____, _____.

_____
                                    Signature

List Title_____

_____
                                Type or Print Name

ATTEST:

_____
                        Signature

List Title_____

_____
                    Type or Print Name