	ST	DOMESTIC DESTRUCTION ATE OF MAINE OF CONSOLIDATION				
	(	A Maine Corporation)	Deputy Secretary of State			
AND			A True Copy When Attested By Signature			
	(	A Maine Corporation)				
		FORMING	Deputy Secretary of State			
Pursuant to 13 of Consolidati		A §904 or 13 MRSA §961, the undersigned con	rporations, execute and deliver for filing the following Articles			
FIRST:	The r	name of the new corporation is				
SECOND:	The p	lan of consolidation is set forth in Exhibit attached hereto and made a part hereof.				
THIRD:	("X" one box only for each corporation) As to each participating corporation, the plan of consolidation was adopted in the following manner:					
		Name of Corporation				
		By the members at a meeting on (date), at which a quorum was present and such plan received at least a majority of the votes which members were entitled to cast.  If the Articles of Incorporation require more than a majority vote, by the members at a meeting on (date), and such plan received at least the percentage of votes of the members required by the Articles of Incorporation.				
			itled to vote with respect thereto, dated ,			
	_	without resolution of the board of directors.				
		There being no members, or no members entitled to vote thereon, the plan was adopted by a majority vote of the board of directors in office at a meeting held on				
		Name of Corporation				
		By the members at a meeting on (date), at which a quorum was present and such plan received at least a majority of the votes which members were entitled to cast.				
		If the Articles of Incorporation require more than a majority vote, by the members at a meeting on (date)  , and such plan received at least the percentage of votes of the members				
		required by the Articles of Incorporation.  By the written consent of all members ent without resolution of the board of directors	itled to vote with respect thereto, dated, s.			
		There being no members, or no members the board of directors in office at a meeting	entitled to vote thereon, the plan was adopted by a majority vote of g held on			

Minimum Fee \$25.00 (See §1401)

FOURTH:	The address of the registered office in the State of Maine of				
	is				
	is (street, city, state and zip code)				
FIFTH:	Effective date of the consolidation (if later t	han date of filing of	of Articles) is		
	(Not to exceed 60 day	vs from date of filir	ng of the Articles)		
	,				
DATED					
			(name of corporation)		
		*Bv			
MU	ST BE COMPLETED FOR VOTE	]	(signature)		
	OF MEMBERS				
I certify t	I certify that I have custody of the minutes showing the above action by the members.		(type or print name and capacity)		
·	and above action by the members.	*By			
		Бу	(signature)		
	(name of corporation)				
(gi	gnature of clerk, secretary or asst. secretary)		(type or print name and capacity)		
(51	gradure of cicik, secretary of asst. secretary)	]			
DATED					
			(name of corporation)		
		*By			
MU	MUST BE COMPLETED FOR VOTE OF MEMBERS		(signature)		
	I certify that I have custody of the minutes showing				
1	the above action by the members.		(type or print name and capacity)		
		*By			
	(name of corporation)		(signature)		
(si	gnature of clerk, secretary or asst. secretary)		(type or print name and capacity)		
(si			(type or print name and capacity)		

Please remit your payment made payable to the Maine Secretary of State.

<sup>\*</sup>This document MUST be signed by any duly authorized officer. (13-B MRSA §104.1.B)

## **Customer Contact Cover Letter**

Name of entity(s) on the submitted filings:				
Optional special handling request(s): (check on	aly if applicable)			
Hold attested copy for pick up (will b	be required to pick up at our office in Augusta, Maine)			
24-hour expedited filing (next busine	ess day) service: \$50 additional filing fee per entity			
Immediate expedited filing (same bus	siness day): \$100 additional filing fee per entity			
NOTE: Only one expedite fee is required if filing	multiple documents for the same entity/charter number at the same time			
Payment can be made by check or money orde obtain a credit card voucher at https://www.maine	er (payable to Maine Secretary of State) or by credit card. You may e.gov/sos/cec/forms/credit.pdf.			
Total fee(s)	) enclosed: \$			
(Name of contact person)	(Daytime telephone number)			
(Contact email address for <u>this</u> filing)	(Email address to use for annual report reminders)			
Name and address of person to return the attested	ed copy of the completed filing:			
(Nan	ne of attested copy recipient)			
	(Firm or Company)			
	(Mailing Address)			
	(City, State & Zip)			

NOTE: Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

**Submit filings to:** 

Mailing Address if using US Postal Service Department of the Secretary of State Corporations, UCC and Commissions 101 State House Station Augusta, ME 04333-0101

Mailing Address if using FedEx/UPS
Department of the Secretary of State
Corporations, UCC and Commissions
6 E. Chestnut Street, 5th Floor
Augusta, ME 04330