		Filing Fee \$25.00
Ň	DOMESTIC NONPROFIT CORPORATION	
	STATE OF MAINE	
CERI	<b>FIFICATE OF RESUMPTION</b>	
		Deputy Secretary of State
		A True Copy When Attested By Signature
	(Name of Corporation)	Deputy Secretary of State
resumption.	tificate, the corporation is required to file annual reports beginning with the next reporting deadline following This certificate was adopted by a majority of the ("X" one box only)	
	(date) at (location)	
	("X" one box only) at a meeting legally c	alled and held D by unanimous written consent
SECOND:	It is hereby certified that a majority of the ("X" one box only) is members in directors have voted to resume carrying on activities.	
THIRD:	The address of the registered office of the corpo	pration in the State of Maine is
		(street, city, state and zip code)
FOURTH:	("X" one box only)	corporation in mutual benefit corporation

\*By \_\_\_\_\_

(signature)

## **MUST BE COMPLETED FOR VOTE OF MEMBERS**

I certify that I have custody of the minutes showing the above action by the members.

(signature of clerk, secretary or asst. secretary)

(type or print name and capacity)

\*By \_\_\_\_\_

(signature)

(type or print name and capacity)

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

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

SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE, 101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101 TEL. (207) 624-7752

FORM NO. MNPCA-14A Rev. 9/16/2005

## **Customer Contact Cover Letter**

Name of entity(s) on the submitted filings:			
Optional special handling request(s): (check o	only if applicable)		
Hold attested copy for pick up (will	be required to pick up at our office in Augusta, Maine)		
□ 24-hour expedited filing (next busin	ness day) service: <b>\$50</b> additional filing fee per entity		
Immediate expedited filing (same by	usiness day): <b>\$100</b> additional filing fee per entity		
NOTE: Only one expedite fee is required if filin	g multiple documents for the <u>same entity/charter number</u> at the same tin		
Payment can be made by check or money ord obtain a credit card voucher at https://www.main	ler (payable to Maine Secretary of State) or by credit card. You may ne.gov/sos/cec/forms/credit.pdf.		
Total fee(s	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 attes	sted copy of the completed filing:		
(Na	ame of attested copy recipient)		
	(Firm or Company)		
	(Mailing Address)		

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