ARTICLES OF REVOCATION OF A VOLUNTARY DISSOLUTION OF A WV CORPORATION

Form CD-8 Rev. 01/2023

FILE ONE ORIGINAL

(Two if you want a filed stamped copy returned to you)

FEE: \$15.00

Annual Report Fee May be Required

West Virginia Secretary of State Business & Licensing Division

Tel: (304)558-8000 Fax: (304)558-8381 Website: <u>www.wvsos.gov</u>

	**** The officers or board of directors adopt and file the following Articles of Revocation of a **** Voluntary Dissolution according to the provisions of the WV Code §31D-14-1404.		
1.	The name of the corporation is:		
2.	The date the revocation of dissolution was authorized:		
3.	The <u>mailing address</u> to which correspondence relating to this matter should be addressed is:		
	No. & Street City/State/Zip		
 4. 5. 	The Corporation's board of directors or incorporators revoked the dissolution. The Corporation's board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization. Shareholder action was required to revoke the dissolution and conformed to the provision as required by the provisions of the West Virginia Code.		
	Contact Name Phone Number		
	Attach Complete Annual Report		
6. Signature information (See below * Important Legal Notice Regarding Signature):			
	Print Name of Signer: Title/Capacity:		
	Signature: Date:		

*Important Legal Notice Regarding Signature: Per West Virginia Code §31D-1-129. Penalty for signing false document. Any person who signs a document he or she knows is false in any material respect and knows that the document is to be delivered to the secretary of state for filing is guilty of a misdemeanor and, upon conviction thereof, shall be fined not more than one thousand dollars or confined in the county or regional jail not more than one year, or both.

INSTRUCTIONS FOR FILING A REVOCATION OF A VOLUNTARY DISSOLUTION

If the decision to dissolve is reversed, the actions necessary to revoke the dissolution are very similar to the actions previously required for approval of dissolution.

Send one original application or if you would like a filed copy returned to you, send an additional copy of the original application to the Office of the Secretary of State.

The application needs to be signed by an officer of the corporation or by the chairman of the board of directors.

The filing fee is \$15 and the check should be made payable to the WV Secretary of State. If you are requesting a Certified Copy of the filing returned to you, include the additional payment of \$15 per Certified Copy requested.

Registration fee:	\$15	
\$15 per Certified Copy:	+	
Total Fee:	=	

Make your checks payable to West Virginia Secretary of State.

IF YOU NEED ADDITIONAL INFORMATION CONCERNING FILING FOR A REVOCATION OF A VOLUNTARY DISSOLUTION, PLEASE CONTACT OUR OFFICE AT 304-558-8000.

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Filing Submission Instructions - Business Division

IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORMS.

Please follow the instructions included with the application. Failure to include any of the required information on the form may cause the filing to be rejected.

All forms may be downloaded from our web site www.wvsos.gov.

SUBMIT THE COMPLETED APPLICATION WITH THE CUSTOMER ORDER REQUEST FORM TO ONE OF THE OFFICES BELOW. CHOOSE EXPEDITED OR STANDARD PROCESSING SERVICE. IF NOT USING THE CUSTOMER ORDER REQUEST FORM AND YOU ARE REQUESTING EXPEDITED SERVICE, YOU MUST INCLUDE THE WORD "EXPEDITE" AND THE LEVEL OF EXPEDITED SERVICE BEING REQUESTED (24-HOUR, 2-HOUR OR 1-HOUR) IN YOUR CORRESPONDENCE. BE SURE TO INCLUDE THE CORRECT ADDITIONAL EXPEDITED FEE. THIS FEE IS IN ADDITION TO THE REGULAR FILING FEE (SEE FEES BELOW).

CHOOSE ONE OF THE FOLLOWING PROCESSING SERVICES:

EXPEDITED SERVICE (24-hour, 2-hour and **1-hour**; *Requires standard filing fee plus additional expedite fee, *see below*)

EXPEDITED SERVICE requests may be submitted by: Expedite Service *Fee

24-Hour \$ 25.00 - E-mail to efilings@wvsos.gov

2-Hour \$250.00 - Fax

1-Hour \$500.00 - Walk in delivery

STANDARD PROCESSING (5-10 business days)

STANDARD PROCESSING requests may be submitted by: Standard filing fees apply.

- E-mail to CorpFilings@wvsos.gov

- Walk in delivery (drop off service only filed within 5-10 business days)

INCLUDE PAYMENT:

Be sure to enclose the correct filing fee with your filing. If paying by credit card, be sure to include the e-Payment Authorization form with your filing. Your filing will be rejected if the payment is not included or if the e-Payment Authorization form is not included if paying by credit card.

SUBMIT COMPLETED FILING TO ONE OF THE BUSINESS CENTERS BELOW:

BUSINESS SERVICE CENTERS Standard and Expedited Filings

Martinsburg Office Charleston Office Clarksburg Office One-Stop Business Center North Central WV Business Center 13 Kanawha Blvd. West 153 West Main Street

Suite 201 Suite G- Third Floor Charleston, WV 25302 Clarksburg, WV 26301 Phone: (304) 558-8000 Phone: (304) 367-2775 Fax: (304) 558-8381 Fax: (304) 627-2243

Hours: Mon. -Fri. 9:00a - 5:00p EST Hours: Mon. - Fri. 8:30a - 5:00p EST

Eastern Panhandle Business Center

229 E. Martin Street Martinsburg, WV 25401 Phone: (304) 356-2654 Fax: (304) 260-4360

Hours: Mon. - Fri. 9:00a - 5:00p EST

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Website: www.wvsos.gov

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Customer Order Request

SUBMIT THIS COMPLETED FORM WITH YOUR FILING.

READ CAREFULLY BEFORE SUBMITTING - **Expedite service is NOT AVAILABLE for the following filings:**

- >> Tax Department filings including Sole Proprietorships, General Partnerships, and Associations
- >> Dissolution or Withdrawal of Corporation, Voluntary Association or Business Trust

Order Processing Requested*	: * * * Expedite Processing Requires Additional Fees * * *					
Standard Processing**	24-HOUR Expedite 2-HOUR Expedite 1-HOUR Expedite					
(Avg. processing turnaround 5-10 business days)	(additional \$25.00 fee included) (additional \$250.00 fee included) (additional \$500.00 fee included)					
Email to: eFilings@wvsos.gov						
Email to: <u>Corprinings@wvsos.gov</u>	Email to: CorpFilings@wvsos.gov ALL Requests for Copies of documents email to: Copies@wvsos.gov					
**Standard Processing applications rece	completed and registered in the Secretary of State registration database. ived by E-MAIL or FAX must include the e-Payment Authorization form with credit card information. In the secretary of State office location requesting the filing be processed will be assessed a 24-HOUR.					
Name of Entity:						
Return filing to: (Return Address)						
Contact Name:	Phone:					
Return Delivery Options: Email	or Fax options do not receive a copy via mail; must be ordered separately.					
Email to:	Fax to:					
Hold for Pick Up Mail to Return Address above FedEx: Acct #						
Other (explain below):	UPS: Acct #					
Order Description (include items being ordered and fee breakdown):						
* PLEASE NOTE: Original paperwork is kept by this office. Include a copy of the original filing if you want a file stamped copy returned to you at no extra charge. Certified copy requests are an additional \$15 per certified copy being requested.						
Payment Method:						
Check/Money Order	Credit Card (Must attach e-Payment Authorization request form including payment information.)					
Cash (Do Not mail cash) Pre-paid Acct #: Attach signed pre-paid slip.						

MAC WARNER Secretary of State State Capitol Building Charleston, WV 25305 Phone: (304) 558-6000 Website: www.sos.wv.gov

24-hour, 2-hour and 1-hour Expedite Service Guidelines

IMPORTANT: To ensure expedited service, please mark "EXPEDITE" in a conspicuous place at the top of the service request. Please indicate method of delivery.

24-HOUR EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your "24-HOUR EXPEDITE" request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is \$25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

Time Constraints: Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office <u>in acceptable fileable form</u>.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgement (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.

West Virginia Secretary of State

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e-Payment Authorization	USE BLACK INK ONLY - DO NOT HIGHLIGH This document contains confidential financial information and will be properly shredded after paymen has been processed by this office. Electronic storage of payment information is only permitted by signe authorization below which may be retracted at any time by written request by the authorized party.
Service Type: Fax E-mail	Mail
Payment by Card (card holder name and	d billing address required below)
Card Type: Visa	Mastercard Discover American Express
Credit Card Number:	V Code*
* 3-digit number on back of VISA, Mas 4-digit number on front right side of A	
	oses, all credit card payments must include the 3- or 4-digit CVV2 code (V Code) number this code will result in the rejection of your filing or service request.
Credit Card Expiration Date: Month:	Year:
	Amount to Charge Card: USD \$
Order Information (required)	
Entity Name:	
Card Holder Information:	
Name as it appears on the account	
Billing Address	
City	State Zip Code
Telephone	Ext.
Payment Information Storage Author I authorize the Secretary of State to store this	payment information for future payment transactions processed by Secretary of State:
X	Date
Authorized Signature	
Payment Authorization (required)	
I authorize the Secretary of State to bill an am	ount not to exceed the following to be charged to the above listed account(s):
X Authorized Signature	Date
Authorized Signature	Not to Exceed Amount: USD \$