

**ARTICLES OF DISSOLUTION**

Pursuant to A.R.S. § 10-11403

1. The name of the corporation is:

\_\_\_\_\_.

2. Dissolution of the corporation was authorized on

the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

3. Dissolution was duly authorized by act of:

- The members.
- The board of directors.
- And by the person or persons so specified in the corporation Articles of Incorporation or bylaws.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_



Arizona Department of Revenue • Special Operations Section

PO Box 29070 • Phoenix, AZ 85038

Telephone: (602) 716-6234

TAX CLEARANCE APPLICATION

1. Applicant Information:

Form with fields for APPLICANT NAME, DAYTIME PHONE NO., STREET ADDRESS, CITY, STATE, and ZIP CODE.

2. Tax Clearance Purpose: Check only one box.

CERTIFICATE OF COMPLIANCE FOR DISSOLUTION OR WITHDRAWAL:

- Checkboxes for Dissolution of Corporation and Withdrawal from Arizona.

LETTER OF GOOD STANDING:

- Checkboxes for Sale of Business, Personal, Residency, Other, Gaming, Healthy Forest Certification, and Motion Picture Production Incentive.

3. Application Type: Check only one box and provide tax identification number(s).

- Checkboxes for Corporation, S Corporation, Partnership, Tax Exempt Organization, Limited Liability Company, Limited Liability Partnership, Estate, Trust, and Individual, each with associated tax ID fields.

4. Signature

Form with fields for PRINT NAME, PRINT SPECIFIC TITLE, SIGNATURE, and DATE.

5. Mail application to: Arizona Department of Revenue, Special Operations Section, PO Box 29070, Phoenix, AZ, 85038

Do not fax the application. Faxed applications will not be processed.

Be sure to sign the application. Unsigned applications will not be processed.

If your application cannot be approved, you must clear all deficiencies and resubmit an application.

POWER OF ATTORNEY: If this application is submitted by anyone other than a corporate officer, general partner, or individual (sole proprietor), Arizona Form 285, General Disclosure/Representation Authorization Form, is required. Visit our web site at http://www.azdor.gov and click on the Forms link to obtain Form 285.