

Filing Fee \$90.00

**FOREIGN  
BUSINESS CORPORATION**

**STATE OF MAINE**

**APPLICATION OF WITHDRAWAL**

<p>_____ Deputy Secretary of State</p> <hr/> <p><b>A True Copy When Attested By Signature</b></p> <hr/> <p>_____ Deputy Secretary of State</p>
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\_\_\_\_\_  
(Name of Corporation)

Pursuant to [13-C MRSA §1521](#) or [§1523](#), the undersigned foreign corporation executes and delivers the following Application of Withdrawal:

**FIRST:** The jurisdiction of its incorporation is \_\_\_\_\_.

**SECOND:** The date on which it was authorized to do business in the State of Maine is \_\_\_\_\_.

**THIRD:** The foreign corporation is not transacting business in this State and that it surrenders its authority to transact business in this State.

**FOURTH: (For Foreign Corporation Upon Conversion to a Nonfiling Entity):**  
The type of other entity to which the foreign business corporation has been converted is \_\_\_\_\_  
\_\_\_\_\_ and the jurisdiction whose laws govern its internal affairs is \_\_\_\_\_.

**FIFTH:** The foreign corporation revokes the authority of its registered agent to accept service on its behalf and appoints the Secretary of State as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in this State.

The mailing address to which the Secretary of State may mail a copy of any process served on the Secretary of State:  
\_\_\_\_\_  
(street, city, state and zip code)

**SIXTH:** The foreign corporation is committed to notify the Secretary of State in the future of any change in its mailing address.

**DATED** \_\_\_\_\_ **\*By** \_\_\_\_\_  
(signature of any duly authorized officer)  
\_\_\_\_\_  
(type or print name and capacity)

\*This document **MUST** be signed by any duly authorized officer. ([13-C MRSA §121.5](#))

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**

# Customer Contact Cover Letter

Name of entity(s) on the submitted filings:

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**Optional special handling request(s):** (check 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 business day) service: **\$50** additional filing fee per entity
- Immediate expedited filing (same business 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 order** (payable to Maine Secretary of State) or by credit card. You may obtain a credit card voucher at <https://www.maine.gov/sos/cec/forms/credit.pdf>.

Total fee(s) enclosed: \$ \_\_\_\_\_

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(Name of contact person)

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(Daytime telephone number)

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(Contact email address for this filing)

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(Email address to use for annual report reminders)

Name and address of person **to return the attested copy** of the completed filing:

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(Name of attested copy recipient)

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(Firm or Company)

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(Mailing Address)

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(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](mailto: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