



SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470

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CERTIFICATE OF DISSOLUTION RELIGIOUS CORPORATION

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.

<p>FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS):</p> NAME: ADDRESS: CITY: STATE: ZIP:	<p>FOR OFFICIAL USE ONLY:</p>
<p>THE UNDERSIGNED HEREBY CERTIFIES THAT</p> <p>1. AT A MEETING OF _____ A RELIGIOUS CORPORATION WITHIN THE MEANING OF THE CONNECTICUT GENERAL STATUTES, IT WAS VOTED THAT SAID CORPORATION BE DISSOLVED.</p>	
<p>2. THE AFOREMENTIONED MEETING OF MEMBERS WAS HELD ON _____ (MO./DAY/YR.), AT _____, WAS WARNED AND HELD FOR THE PURPOSE OF VOTING ON THE DISSOLUTION OF SAID RELIGIOUS CORPORATION AND THE VOTE TO DISSOLVE WAS THE AFFIRMATIVE VOTE OF TWO-THIRDS (2/3) OF THOSE MEMBERS PRESENT.</p>	
<p>3. THE UNDERSIGNED IS THE PERSON AUTHORIZED BY SAID RELIGIOUS CORPORATION TO EXECUTE THIS CERTIFICATE.</p>	
<p>DATED AT _____ THIS _____ DAY OF _____</p>	
<p>NAME & TITLE (CLERK, SECRETARY OR OTHER OFFICER) [PLEASE TYPE OR BLOCK PRINT]</p> <p>_____</p> <p>RESIDENCE ADDRESS: (P.O.BOX UNACCEPTABLE)</p> <p>ADDRESS:</p> CITY: <p>STATE: ZIP:</p> <p>SIGNATURE</p> <p>_____</p>	

STATE OF CONNECTICUT)

) SS: _____

COUNTY OF)

PERSONALLY APPEARED _____ , _____ , OF

NAME

TITLE

NAME OF RELIGIOUS SOCIETY OR CORPORATION

AND MADE OATH TO THE TRUTH OF THE ABOVE CERTIFICATE.

NOTARY OR COMMISSIONER OF THE SUPERIOR COURT