| | Filing Fee \$5.00 |
|--|---|
| DOMESTIC NONPROFIT CORPORATION | |
| | |
| STATE OF MAINE | |
| APPLICATION FOR EXCUSE | |
| | Deputy Secretary of State |
| | A True Copy When Attested By Signature |
| (Name of Corporation) | Deputy Secretary of State |
| Pursuant to 13-B MRSA §1301.5, the undersigned corporation execution in the second sec | President Treasurer |
| of the above named corporation, a corporation duly organized un | der the laws of the State of Maine, certify that said corporation |
| ceased to carry on activities on (date) A | pplication is made to be excused from further filing an annual |
| report with the Secretary of State of Maine, so long as the corporati | on in fact carries on no activities. |
| I further certify that all required Annual Reports have been fil | ed with the Secretary of State. (Note: If the excuse processis |
| completed on or before June 1st, then the Annual Report covering the | e previous calendar year is not required.) |
| | |
| DATED | |
| | (signature) |

NOTE: The excuse is effective upon acceptance by the Office of the Secretary of State.

Customer Contact Cover Letter

| Name of entity(s) on the submitted filings: | |
|---|---|
| | |
| Optional special handling request(s): (check on | nly if applicable) |
| Hold attested copy for pick up (will b | pe required to pick up at our office in Augusta, Maine) |
| 24-hour expedited filing (next busine | ess day) service: \$50 additional filing fee per entity |
| Immediate expedited filing (same bus | siness 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 obtain a credit card voucher at https://www.maine | er (payable to Maine Secretary of State) or by credit card. You may e.gov/sos/cec/forms/credit.pdf. |
| Total fee(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 atteste | ed copy of the completed filing: |
| (Nan | me of attested copy recipient) |
| | (Firm or Company) |
| | (Mailing Address) |
| | (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

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
111 Sewall Street, 4th Floor
Augusta, ME 04330