

**APPLICATION FOR REINSTATEMENT OF A CORPORATION
ADMINISTRATIVELY DISSOLVED**

FILING FEE: \$100.00

File Original and two Copies.

FILE WITH: REGISTRAR OF CORPORATIONS

**Department of Commerce
1st Floor of Department of Commerce Bldg.
Capitol Hill Caller Box 10000
Saipan, MP 96950**

With this application you must obtain and attach a Certificate of Compliance from the Department of Finance Division of Revenue and Taxation reciting that all taxes owed by the Corporation has been paid.

Name and Address of Corporation:

Telephone No.: () _____

State the Date of the Administrative Dissolution:

State the Ground(s) for Dissolution:

State that the Corporation's name satisfies the requirements of Section 4.01

Signature:

Date: _____

**Print Name & Title of Person Signing
(Must be Director or Officer of the Corporation)**