



**FRANCISCO V. AGUILAR**  
Secretary of State  
401 North Carson Street  
Carson City, Nevada 89701-4201  
(775) 684-5708  
Website: [www.nvsos.gov](http://www.nvsos.gov)  
[www.nvsilverflume.gov](http://www.nvsilverflume.gov)

## Instructions for Certificate of Termination of Amendment/ Certificate Pursuant to 78.209/ Conversion/Exchange/Merger

**IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM.**

TYPE or PRINT the following information and submit the filing with Customer Order Instruction Form and payment:

**Termination of a Certificate of Amendment, Certificate pursuant to 78.209, Conversion, Exchange or Merger, must be filed on or before the effective date stated on the original document being terminated.**

**1. ENTITY INFORMATION:** In the first field provided, indicate the name of entity terminating an Amendment, Certificate pursuant to NRS 78.209.

**Or**

Terminating a Conversion, Exchange or Merger, in the second field provided, enter the following:

Name of the Constituent entity in a Conversion,  
The name Merging entity in a Merger  
The name of Acquired entity in an Exchange

**And** enter the following:

Name of the Resulting entity of a Conversion  
Name of the Surviving entity of a Merger  
Name off the Acquiring entity of an Exchange.

**2. TYPE OF TERMINATION:** Indicate the filing being terminated.

For Terminating an Amendment before issuance of stock, select the appropriate box to indicate Incorporators or Board of Directors.

**3. EFFECTIVE DATE:** List the effective date stated on the original document being terminated.

**4. FILING DATE:** List the original filing date of the document being terminated.

**5. DESCRIPTION:** State the description of the original document or certificate being terminated.

**6. SIGNATURE(S):** Signature(s) required are based on the type of document being terminated. Form will be returned if unsigned.

**Filing may be submitted Online at [www.nvsilverflume.gov](http://www.nvsilverflume.gov), or to the Office of the Secretary of State, by mail to the following addresses:**

**Carson City – Main Office**  
**Regular and Expedited Filings**

**Mail:**  
Secretary of State  
Commercial Recordings Division  
401 North Carson Street  
Carson City NV 89701-4201

**Phone:** 775-684-5708  
**Fax:** 775-684-5725

**General Inquires:** [sosmail@sos.nv.gov](mailto:sosmail@sos.nv.gov)

**Las Vegas – Satellite Office**  
**Expedited Filings Only**

**Mail:**  
Secretary of State  
North Las Vegas City Hall  
2250 Las Vegas Blvd. North, Suite 400  
North Las Vegas, NV 89030

**Phone:** 702-486-2880  
**Fax:** 702-486-2888  
**General Inquires:** [soslvmail@sos.nv.gov](mailto:soslvmail@sos.nv.gov)



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ABOVE SPACE IS FOR OFFICE USE ONLY

## **Termination of Amendment/Certificate Pursuant to 78.209/ Conversion/Exchange/Merger**

**NRS 78.380, 78.390, 78.209, 86.221, 86.226 and 92A.175/92A.240**

TYPE OR PRINT - USE DARK INK ONLY - DO NOT HIGHLIGHT

<b>1. Entity Information:</b>	<p>Name of entity terminating an Amendment or Certificate pursuant to 78.209:</p> <div></div> <p>Termination of Conversion, Exchange or Merger:</p> <p>The name of each Constituent, Merging or Acquired entity:</p> <div></div> <p>The name of each Resulting, Surviving or Acquiring Entity:</p> <div></div> <p>(If more than two entities, attach additional page(s) if necessary)</p> <p>Entity or Nevada Business Identification Number (NVID): <div></div></p>
<b>2. Type Termination:</b> (Select one)	<p><input type="checkbox"/> Certificate of Termination of Amendment For a Nevada Profit Corporation (Pursuant to NRS 78.380 - Before Issuance of Stock)</p> <p>The undersigned affirmatively declare that to the date of this certificate, no voting stock of the corporation has been issued and that they constitute at least two-thirds of the following:</p> <p>(Check only one box)    <input type="checkbox"/> incorporators    <input type="checkbox"/> board of directors</p> <p><input type="checkbox"/> Certificate of Termination of Amendment For Nevada Profit Corporation (Pursuant to NRS 78.390 - After Issuance of Stock)</p> <p>Pursuant to the resolution of the stockholders, the board of directors is authorized to terminate the effectiveness of the certificate.</p> <p><input type="checkbox"/> Certificate of Termination of Filing Pursuant to NRS 78.209</p> <p><input type="checkbox"/> Certificate of Termination of Amendment For a Nevada Limited-Liability Company (Pursuant to NRS Chapter 86.221 and 86.226) (select one)</p> <p><input type="checkbox"/> No member's interest in the limited-liability company has been issued and the undersigned declare that they constitute at least two-thirds of the Managers.</p> <p><input type="checkbox"/> Pursuant to the resolution of the members, the manager of the company or, if management is not vested in a manager, a designated member is authorized to terminate the effectiveness of the certificate</p> <p><input type="checkbox"/> Certificate of Termination of Articles of Merger, Exchange or Conversion (Pursuant to NRS Chapter 92A)</p> <p>The below mentioned filing has been terminated pursuant to the plan.</p>
<b>3. Effective Date:</b>	Effective date, as specified, on the certificate or original document: <div></div>
<b>4. Filing Date:</b>	Filing date of the original certificate with the Nevada Secretary of State: <div></div>
<b>5. Description:</b>	Description of the certificate to be terminated or original document filed: <div></div>



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**NRS 78.380, 78.390, 78.209, 86.221, 86.226 and 92A.175/92A.240**

**6. Signature(s):**  
(Required)

Termination of Amendment or Certificate Pursuant to 78.209:

Based on type of termination being filed must be signed by: (see page one, section 2 of this form)

- a. Incorporator
- b. Director
- c. Stockholder
- d. Manager
- e. Member

Conversion/Exchange/Merger Termination:

This Termination of Conversion/Exchange/Merger must be signed by one of the following:

- a. An officer of a corporation, whether or not for profit
- b. One of the general partners of a limited partnership
- c. A manager of a limited-liability company with managers or by one member of a limited-liability company without managers
- d. A trustee of a business trust
- e. One general partner of a general partnership

The articles of merger must be signed by each foreign constituent entity in the manner provided by the law governing it. (NRS 92A.230)

Upon the filing of this certificate with the Nevada Secretary of State the effectiveness of the certificate has been terminated.

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Please include any required or optional information in space below:**  
(attach additional page(s) if necessary)



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## Customer Order Instructions

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Processing  
Service Requested: ☐ Regular ☐ 24-Hour Expedite (additional fee included)

Name of Entity:

Date:

Return to:

Contact Name:

Phone:

**Return Delivery:** (email or fax options do not receive a copy via mail; must be ordered separately)

☐ Email to:

☐ Fax to:

☐ Hold for Pick Up

☐ Mail to Address Above

☐ FedEx: Acct #

☐ Other: (explain below)

Order Description: (include items being ordered and fee breakdown)\*

**\*PLEASE NOTE:** this office keeps the original paperwork. The first file stamped copy ordered at the time of filing is at no charge. Each additional copy is **\$2.00** per page (plus **\$30.00** for each certification).

Total Amount:

Method of Payment:

☐ Check/Money Order ☐ Credit Card (attach ePayment checklist)

☐ Trust Account:

☐ Use balance remaining in job #



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## 1 or 2-Hour Expedite Customer Order Instructions

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Processing  
Service Requested:

☐

2-Hour Expedite  
(additional **\$500.00** fee included)

☐

1-Hour Expedite  
(additional **\$1000.00** fee included)

Name of Entity:

Date:

Return to:

Contact Name:

Phone:

**Return Delivery:**

☐

Email to:

☐

Fax to:

☐

Hold for Pick Up

☐

Mail to Address Above

☐

FedEx: Acct #

☐

Other: (explain below)

Order Description: (include items being ordered and fee breakdown)\*

**\*PLEASE NOTE:** this office keeps the original paperwork. The first file stamped copy ordered at the time of filing is at no charge. Each additional copy is **\$2.00** per page (plus **\$30.00** for each certification).

Total Amount:

Method of Payment:

☐

Check/Money Order

☐

Credit Card (attach ePayment checklist)

☐

Trust Account:

☐

Use balance remaining in job #



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## **24-hour, 2-hour and 1-hour Expedite Service Guidelines**

***IMPORTANT: To ensure expedited service, please mark "Expedite" in a conspicuous place at the top of the service request. Please indicate method of delivery.***

### **24-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 24-hour expedite service on most filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Check the 24-hour expedite box on your customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 24-hour expedited service, include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling ranges from \$25.00 to \$125.00. Please consult our fee schedules for the appropriate 24-hour expedite fee. If you require assistance, please contact this office.

**Time Constraints:** Each filing submitted receives same day filing date and may be picked up within 24-hours. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in fileable form.

### **2-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

### **1-HOUR EXPEDITE SERVICE**

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$1000.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

**1-Hour and 2-Hour Time Constraints:** Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgment (e-mail) or to provide a correct e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in complete filing condition.

**The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.**



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## ePayment Checklist

All major credit cards are accepted. For security purposes, please do NOT email this authorization form. Email is NOT a secure form of transmittal to protect your card information.

### Processing Requested:

- ☐ Regular ☐ 24-HOUR Expedite ☐ 4-HOUR Expedite (Apostille only)  
☐ 2-HOUR Expedite ☐ 1-HOUR Expedite ☐ Same Day (Domestic Partnership only)

### Order Information (required)

Entity Name/Order Reference: \_\_\_\_\_

Cardholder Name (as shown on credit card): \_\_\_\_\_

Billing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Last 4 Digits of Credit Card: \_\_\_\_\_ Card Type: ☐ VISA ☐ MasterCard ☐ Amex ☐ Discover

Authorized to Charge: \_\_\_\_\_

By signing this form, I understand that there will be a non-refundable credit card payment processing fee of 2.5% added to the total amount of the transaction. I understand if I do not wish to pay the credit card processing fee, I can either mail a check, or pay in person by cash, check, or money order. I certify that I am the cardholder and responsible for this payment in accordance with the issuing bank cardholder agreement. I further understand that I am responsible for any penalty fees that may be incurred if the credit card company denies my credit card payment.

### Authorized Signature

X \_\_\_\_\_ Date: \_\_\_\_\_

### CREDIT CARD INFO: Your payment cannot be processed unless all fields are completed!

1. Credit Card Number: \_\_\_\_\_
2. Expiration Date: \_\_\_\_\_
3. Security Code\*: \_\_\_\_\_  
\*3-digit number found on the far right of the backside of VISA, MasterCard and Discover cards  
4-digit number found on the front right side of American Express card.

All 3 fields **MUST** be completed!  
This section will be destroyed after the payment is processed.