

State of New Hampshire

Filing fee: \$35.00
Use black print or type.

Form FND-6
RSA 564-F:20-2004

REVOCATION OF DISSOLUTION

PURSUANT TO THE PROVISIONS of the New Hampshire Foundation Act, the undersigned of the foundation hereinafter named, adopts the following revocation of dissolution:

FIRST: The name of the foundation is _____
_____.

SECOND: The effective date of the dissolution was _____.

THIRD: The revocation of dissolution has been authorized by (check one):

- A majority of the organizers or a majority of the initial directors.
 The founder.
 The board of directors.

FOURTH: The revocation of dissolution was authorized on (date) _____. (The revocation of dissolution must be filed within 120 days of dissolution.)

(Foundation Name)

(Signature)

(Print or type name)

(Title)

Date signed: _____

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989
Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH

Form FND-6 (12/2017)