

SERVICO, INC.
283 WASHINGTON AVENUE
ALBANY, NEW YORK 12206
518.463.4179 / 518.463.3752 : FAX

**WORKSHEET FOR PREPARATION/FILING OF NEW YORK
CERTIFICATE OF DISSOLUTION FOR NY CORPORATION**

Name of Corporation & EIN # (REQUIRED)

Date of Incorporation

Names and Addresses of ALL Officers, Directors (give titles)

1. _____

2. _____

3. _____

4. _____

NAME/TITLE OF OFFICER(S) AUTHORIZING DISSOLUTION

PREPARE AND FILE	\$175.00
DISBURSEMENT TO DEPT. OF STATE (Filing)	\$ 60.00 (routine)
ADMINISTRATIVE HANDLING	\$ 5.00
TOTAL	<u>\$240.00</u>

(A Power of Attorney giving Servico Permission to handle tax issues/consent is required. POA form can be downloaded with this worksheet and faxed or emailed to us. We will also need the original return(s) and any payment (s) for any outstanding tax years, as well as the final return and final tax payment (must be paid through the end of the month in which you are requesting dissolution).

Your Name: _____

Your Firm: _____

Billing/Mailing Address: _____

Your Phone #: _____ Your Fax #: _____

Let This Letter Serve as My Authorization to Charge My Amex/MC/Visa (Initial Here) _____

Card # _____ Expires _____ IN THE AMOUNT OF ** _____

Print Name of Card Holder: _____

Print Complete Billing Address on Credit Card: _____

Signature of Card Holder: _____

** Please note: This fee is an estimate only. It is possible to incur additional disbursements in order to complete this order. If so the additional fees will be charged to this credit card.