

**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  
1<sup>st</sup> 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)**