Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 973	the second se	ssolution - Nonprofi one: (503) 986-2200
REGISTRY NUMBER: 205605-87	FILED Mar 13 2018	
In accordance with Oregon Revised Statute 192.410-192.490, the Information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.		For office use only
Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.	SECRETARY OF STATE	
1. ENTITY NAME: EMMANUEL COMMUNITY GENERAL SERVICES		
2. DATE DISSOLUTION WAS AUTHORIZED: 02/22/2018		
The dissolution was approved by a sufficient vote of the board.		

## 3. CHECK THE APPROPRIATE STATEMENT:

O Approval of members was not required and dissolution was approved by a sufficient vote of the board of directors or incorporators.

O Membership approval was required.

The vote was as follows:

Class(es) entitled to vote	Number of members	Number of votes entitled	Number of votes cast	Number of votes cast
	entitled to vote	to be cast	FOR	AGAINST

## 4. NOTICE OF DISSOLUTION: (Public benefit and religious corporations)

By submission of this form to the Corporation Division, you are acknowledging that notice of dissolution has also been sent to the Charitable Activities Section of the Attorney General.

(For more information, see: http://www.doj.state.or.us/charigroup/pages/howtoclose.aspx)

5. EXECUTION: I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

signature:	Printed Name:	Title:
He MAN	C T Wells	President
/		

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Articles of Dissolution - Nonprofit (11/17)