

**\*\*\*EFFECTIVE DATE: DECEMBER 31, 2018\*\*\*****Articles of Dissolution - Business/Professional**

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200

REGISTRY NUMBER: 398103-87**FILED****JAN 07 2019**

Print Form

Reset Form

In accordance with Oregon Revised Statute 182.410-182.480, 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.

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

OREGON

For office use only

SECRETARY OF STATE

1. NAME OF CORPORATION: TCB Commercial Corporation2. DATE DISSOLUTION WAS AUTHORIZED: December 31, 2018  
Future date not allowed.

3. COMPLETE EITHER SECTION 4 OR 5 BELOW.

4. None of the corporation's shares have been issued and the corporation has not commenced business. No debt of the corporation remains unpaid. A majority of the incorporators or initial directors authorized this dissolution.

DATE OF INCORPORATION: \_\_\_\_\_

## 5. CHECK THE APPROPRIATE STATEMENT:

☒ All shareholders entitled to vote consented in writing to the dissolution.☐ Shareholder vote on the resolution to dissolve was as follows and the number of votes cast in favor of dissolution was sufficient for approval.

Class or series of shares	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

## 6. EXECUTION:

I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation. 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:

Michael L. Messinger

Title:

President

CONTACT NAME: (To resolve questions with this filing)

Robert G. Burt

PHONE NUMBER: (Include area code)

(503) 223-3600

Articles of Dissolution - Business/Professional (11/17)

**FEES**

Required Processing Fee \$100

Processing fee

Free copies program

TCB COMMERCIAL CORPORATION



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