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DO NOT STAPLE

FORM **2001**

ARTICLES OF MERGER
Domestic and Foreign For-Profit Corporations
 Sec. 180.11045 and 180.1105, Wis. Stats.

1. Non-Surviving Parties to the Merger (If more than 2 non-survivors, schedule as an additional page):

Corporation Name:	Organized under the laws of _____ (state or country)
Corporation Name:	Organized under the laws of _____ (state or country)

2. Surviving Corporation:

Corporation Name:	Organized under the laws of _____ (state or country)
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3. A. Indicate the name of the entity whose articles of incorporation will be the articles of incorporation of the surviving corporation:

And/or

B. The articles of incorporation of the surviving corporation are amended as follows:

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4. Indicate below if the surviving corporation is an indirect wholly owned subsidiary or parent:

- The surviving corporation is a Domestic or Foreign Business Corporation that is an indirect wholly owned subsidiary or parent and the merger was approved in accordance with sec. 180.11045 and the requirements of sec. 180.11045(2) have been satisfied.
- The surviving corporation is not a Domestic or Foreign Business Corporation that is an indirect wholly owned subsidiary or parent.

5. The plan of merger has been approved and adopted by each corporation that is a party to the merger as required under sec. 180.1103 or 180.1104, Wis. Stats., as applicable.

6. The executed plan of merger is on file at the principal place of business of the surviving corporation.

7. The surviving corporation will provide a copy of the plan of merger, upon request and without cost, to any shareholder of a corporation that was a party to the merger or, upon payment to the surviving corporation of an amount equal to the cost of producing the copy, to any other interested person.

8. (OPTIONAL) Delayed Effective Date and Time of Merger

These articles of merger, when filed, shall be effective on _____ (date) at _____ (time).

(An effective date declared under this article may not be earlier than the date the document is delivered to the department for filing, nor more than 90 days after its delivery. If no effective date and time is declared, the effective date and time will be determined by sec.180.0123).

9. Executed on _____ (date)
by the surviving corporation on behalf of all parties
to the merger.

(Signature)

Mark (X) below the title of the person executing the document.

(Printed Name)

Title: President OR Secretary
or other officer title _____

This document was drafted by: _____
(Name the individual who drafted the document)

INSTRUCTIONS (Ref. Sec. 180.11045 and 180.1105, Wis. Stats. for document content)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a check for \$150.00 payable to the department. Filing fee is **non-refundable**. (If sent by Express or Priority U.S. mail, please visit www.wdfi.org/contact_us/ for current physical address). This document can be made available in alternate formats upon request to qualifying individuals with disabilities. The original must include an original manual signature. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577. Hearing-impaired may call 711 for TTY.

▲ Please provide an email or postal mailing address for the filed copy of the document.

Your **phone number** during the day: _____

Instructions – Continued

NOTICE: This form may be used to accomplish a filing required or permitted by statute to be made with the department. Information requested may be used for secondary purposes. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

1. Enter the corporation name and state or country of organization of each non-surviving party to the merger. Definitions of foreign entity types are set forth in sec.180.0103 (9), Wis. Stats.
2. Enter the corporation name (prior to any amendment to change the name) and state or country of organization of the surviving corporation.
3. A. and/or B. Indicate the name of the corporation that is a party to the merger whose articles of incorporation will be the articles of incorporation of the surviving corporation. If there will be amendments to the articles of incorporation of the surviving corporation enter those amendments in B, or attach restated articles.
4. Indicate whether the surviving corporation is an indirect wholly owned subsidiary or parent. See sec. 180.11045, Wis. Stats. for requirements. See sec. 180.11045(1)(b), Wis. Stats. for definition.
5. This statement is required per sec. 180.1105 (1)(cm) of the Wis. Stats.
6. This statement is required per sec. 180.1105(f) of the Wis. Stats.
7. This statement is required per sec. 180.1105(g) of the Wis. Stats.
8. (Optional) If the merger is to take effect at a time other than the close of business on the day the articles of merger are delivered to the department for filing, state the effective date or date and time. An effective date may not be earlier than the date the document is delivered to the Department of Financial Institutions, nor a date more than 90 days after its delivery.
9. Enter the date of execution and the name and title of the person signing the document. If the document is executed in Wisconsin, sec. 182.01(3) provides that it shall not be filed unless the name of the person (individual) who drafted it is printed, typewritten or stamped thereon in a legible manner. If the document is not executed in Wisconsin, enter that remark.