

# Articles of Revival

## Business Corporations Act

### INSTRUCTIONS

**This information is submitted to your authorized service provider for filing with the Registrar pursuant to the Business Corporations Act and must conform to Section 1 of the Regulations made under the Act.**

Item 1. Enter the dissolved corporation's full legal name. If the corporation had been dissolved for more than 3 years, these articles must be submitted with an Alberta Name Search Report (from the NUANS database), dated not more than 90 days from the date the Articles of Revival are submitted to your authorized service provider.

Item 2. The Corporate access number must be entered. It is printed on the top right hand corner of the:

- Certificate of Incorporation
- Certificate of Continuance
- Certificate of Amalgamation

Item 3. Enter the reasons why the corporation was dissolved, adding specific references, where possible, to the section of the Corporations Act under which it was dissolved.

Item 4. Enter your interest / relationship in the corporation and why you seek to have the corporation revived.

Item 5. Enter your full name (last, first, second).

Item 6. Enter your complete business or home address, including the postal code.

#### **The Articles must be filled with:**

- Annual Returns not previously filed
- All notices required under the Act.

It is recommended that a notice of Address and Notice of Directors be submitted to your authorized service provider to confirm that information

#### **The following information must be included:**

- Name of person authorizing (director/authorizing officer)
- Identification (example: Drivers License number)
- Date

When the information is submitted to your service provider, Identification of the authorized person/officer/director. Declarant will be required.

**Note:** Due to limited space, an appropriate attachment adhering to Section 1 of the Regulations is acceptable.

# Articles of Revival

Business Corporations Act

Section 201

**1. Name of Dissolved Corporation**

**2. Corporate Access Number**

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**3. Reason for Dissolution:**

**4. Enter your Interest in the corporation and why you seek revival of the corporation:**

**5. Name of Applicant**

Name (Last, First, Second)

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**6. Business or Home Address of Applicant**

Address

City/Town

Province

Postal Code

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Name of Person Authorizing (Please Print)

\_\_\_\_\_  
Identification

\_\_\_\_\_  
Date

This information being collected for the purpose of corporate registry records in accordance with the Business Corporations Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for Alberta Registries, Research and Program Support, 3<sup>rd</sup> floor, Commerce Place 10155-102 Street, Edmonton Alberta T5J 4L4 (780) 422-2362