



FORM **55**

**REVOCATION OR RESCISSION  
OF VOLUNTARY DISSOLUTION**

Sec. [178.0803](#), [180.1404](#), [181.1404](#), or [183.0703](#), Wis. Stats.

1. Name of entity: \_\_\_\_\_

2. Effective date of the dissolution: \_\_\_\_\_

3. Date that revocation or rescission of dissolution was authorized: \_\_\_\_\_

4. How the revocation or rescission of dissolution was authorized:

*Mark (X) the applicable statement.*

- If the above-named entity is a **limited liability company** or **limited liability partnership**, check the box to affirm that the following statement is true:

Dissolution has been rescinded under section [178.0803](#) or [183.0703](#) of the Wisconsin Statutes, as applicable. The rescission of dissolution was authorized by the affirmative vote or consent of each member (in the case of a limited liability company) or each partner (in the case of a limited liability partnership).

- If the above-named entity is a **business corporation**, mark the applicable statement (*select one*):

The revocation of dissolution was authorized in the same manner as the dissolution.

**OR**

The revocation of dissolution was authorized by the board of directors under section [180.1404\(2\)\(a\) or \(b\)](#) of the Wisconsin Statutes.

- If the above-named entity is a **nonstock corporation**, mark the applicable statement(s) (*select all that apply*):

The revocation of dissolution was authorized by the corporation's board or the incorporators.

[*If approval of the corporation's members is required to revoke dissolution*] The revocation of dissolution was approved by a sufficient vote of the members of each of class entitled to vote on dissolution.

[*If the approval of a third person is required to revoke dissolution*] The revocation of dissolution was approved by a third person identified in the articles of incorporation.

The dissolution of the corporation was authorized by the members alone or in conjunction with a third person, and their authorization permitted revocation of dissolution by the board alone. Therefore, approval of the members and the third person, if applicable, was not required. [*If this statement is selected, you must also mark the first statement indicating that revocation of dissolution was authorized by the corporation's board.*]

**Execution:**

Executed on \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

Select and mark (X) below the appropriate title  
of the person executing the document.

\_\_\_\_\_  
(Printed name)

For a Business Corporation:

Title:  President  Secretary

Other: \_\_\_\_\_

For all other entity types, the signer must be a person  
authorized by the entity to sign on its behalf.

Title: \_\_\_\_\_

This document was drafted by \_\_\_\_\_  
(Name the individual who drafted the document)

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**Contact Information:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Email Address Phone Number

**INSTRUCTIONS** (Refer to section [178.0803](#), [180.1404](#), [181.1404](#), or [183.0703](#), Wis. Stats., as applicable, 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 the filing fee, payable to the Department of Financial Institutions. (If sent by express or priority U.S. mail, please mail to State of WI-Dept. of Financial Institutions, Division of Corporate and Consumer Services, 4822 Madison Yards Way, 4th Fl., North Tower, Madison WI, 53705.) If requesting optional expedited service, please check the expedited service box in the upper-right corner of the first page and include an additional \$25.00. Filing fees are non-refundable. This document can be made available in alternate formats upon request to qualifying individuals with disabilities. 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) or by email at [DFICorporations@dfi.wisconsin.gov](mailto:DFICorporations@dfi.wisconsin.gov).

**Item 1.** Provide the name of the entity that is revoking its dissolution.

**Item 2.** Enter the effective date of the previously filed articles/statement of dissolution. (Note: A revocation of dissolution under Ch. 180 or 181 must be received by the Department of Financial Institutions within 120 days of the effective date of the dissolution)

**Item 3.** Enter the date that revocation of dissolution was duly authorized by the entity. In most circumstances, revocation of dissolution must be authorized in the same manner that the dissolution was previously authorized. Review the applicable provisions of the Wisconsin Statutes—namely, section [183.0703](#) for limited liability companies, section [178.0803](#) for limited liability partnerships, section [180.1404](#) for business corporations, and section [181.1404](#) for nonstock corporations—for the authorization requirements for your organization’s entity type.

**Item 4.** As noted above, the authorization requirements differ by entity type. Find your organization’s entity type and mark the applicable statement to indicate how the entity obtained authorization to revoke its dissolution. For nonstock corporations, mark all statements that apply.

**Execution.** Signature requirements for this document depend on the type of entity that is filing it:

**If the document is being filed by a business corporation**, the document must be executed by an officer of the corporation, subject to two limited exceptions: (1) if directors have not been selected, it may be signed by an incorporator identified in the initial articles of incorporation; and (2) if the corporation is in the hands of a receiver, trustee or other court-appointed fiduciary, it may be signed by the fiduciary. Corporate directors are not authorized to sign this document in their capacities as directors. (A corporate director who also serves as an officer may sign the document, but that person must sign in their capacity as an officer of the corporation.)

**If the document is being filed by a limited liability company, limited liability partnership, or nonstock corporation**, it must be signed by a person authorized by the entity.

**Drafter name.** If the document is executed in Wisconsin, section 182.01(3) of the Wisconsin Statutes requires that it include the name of the drafter. If the document is not executed in Wisconsin, so indicate in the space provided for the drafter’s name.

**FILING FEE.** The statutory filing fee for this document varies depending on the type of entity:

- For a **business corporation**, the filing fee is **\$10**.
- For **all other entity types**, including limited liability companies, nonstock corporations, general and limited liability partnerships, there is no statutory filing fee.