

Please  
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**DL**  
51-09

KANSAS SECRETARY OF STATE  
**Limited Liability Company**  
**Articles of Organization, Kansas**

## GENERAL FILING INSTRUCTIONS

All information on the articles of organization **must be complete** and accompanied by the **correct filing fee** or the document will **not** be accepted for filing.

Save time and money by filing your articles of organization online at **www.sos.ks.gov**. There, you can also stay up-to-date on your organization's status, annual report due date, and contact addresses.

<input type="checkbox"/> <b>Filing fee</b>	The filing fee for this document is <b>\$165</b> .
<input type="checkbox"/> <b>Payment</b>	<p>Please submit payment by check, money order, or credit card. Checks and money orders need to be made payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. <b>Please do not send cash.</b></p> <p><b>NOTICE: There is a \$25 service fee for all checks returned by your financial institution.</b></p> <p>Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:</p> <p><b>Credit card number</b> _____</p> <p><b>Billing zip code</b> _____ <b>Expiration date</b> _____</p>
<input type="checkbox"/> <b>Daytime phone and contact person</b>	_____
<input type="checkbox"/> <b>Fax filing available</b>	<p>Documents may be fax filed for a processing fee of <b>\$20 in addition</b> to the normal filing fee. Include contact name, daytime phone number, credit card number, credit card expiration date and billing zip code.</p> <p>Fax documents and payment information to <b>Business Services, 785-296-4570</b>. Faxed documents will receive that day's file date if they are without errors and received prior to 4 PM CST.</p> <p>Processed documents will be returned by mail. You may request a file-stamped copy be faxed for an additional \$1 per page. Fax filing does not guarantee same day activation or return faxing.</p>
<input type="checkbox"/> <b>No duplicate copies</b>	Please do not send duplicate copies of your document. The original is processed, and returned to you by mail.
<input type="checkbox"/> <b>No email</b>	We cannot accept any filings by email, except for the MA mailing address change form.
<input type="checkbox"/> <b>No filing by phone</b>	No documents or reports can be filed with our office by phone.
<input type="checkbox"/> <b>Public information</b>	All documents filed with our office are available to the public and may be viewed online without cost. Please consider this when providing information on our forms. Instructions and payment information are shredded after use.

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# DL FORM INSTRUCTIONS

**Effective Date:** Any document that is required by this act to be filed with the Secretary of State shall be effective upon its filing date. Any document may provide that it is not to become effective until a specified date subsequent to its filing date, but such date shall not be later than 90 days after its filing date.

If you wish to include a future effective date for your articles of organization that is not more than 90 days after filing with the Secretary of State, please add the following information at the bottom of the DL form under Item 5 (signature block):

**“Effective Date: \_\_/\_\_/\_\_\_\_.”**

### Question on Form

**1. Company name**

A word of organization must be included in the name per K.S.A. 17-7920. Permitted words of organization are “Limited Company,” “Limited Liability Company,” or the abbreviation “L.C.,” “L.L.C.,” “LC” or “LLC.” Kansas statutes can be reviewed at [www.ksrevisor.org](http://www.ksrevisor.org).

**2. Resident agent**

The resident agent is a person or entity that is authorized to accept service of process (lawsuits) on behalf of the business entity. This does not necessarily mean that the agent himself/herself is being sued, but that he/she has the authority and responsibility to accept service of process on behalf of the business.

**Registered office**

The registered office is the address where the resident agent is located.

**5. Signature**

The articles require the signature of any person authorized to form the limited liability company.

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Memorial Hall, 1st Floor (785) 296-4564  
120 S.W. 10th Avenue kssos@ks.gov  
Topeka, KS 66612-1594 www.sos.ks.gov

THIS SPACE FOR OFFICE USE ONLY.

**Return file-stamped document to (name and address):**

**1. Name of the limited liability company**

(17-7673(a)(1))

**2. Name of resident agent and address of registered office in Kansas**

(17-7673(a)(2))

Must be a Kansas street address. A P.O. Box or Rural Route/Box is unacceptable.  
(17-7924(c))

Name		
Street Address		
City	State <b>KS</b>	Zip

**3. Mailing address**

Address will be used to send official mail from the Secretary of State's Office.

Attention Name			
Address			
City	State	Zip	Country

**4. Tax closing month**

(December is default)

**5. I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct. (17-1709)**

Signature of Authorized Person (17-7908(b))