

**RO**  
53-06

**KANSAS SECRETARY OF STATE**  
**Change of Registered Office or**  
**Agent by a Corporation**  
Instructions

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

**Kansas Office of the Secretary of State:**

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

<input type="checkbox"/> <b>Filing fee</b>	The filing fee for this form is <b>\$35</b> .
<input type="checkbox"/> <b>Payment</b>	Please enclose a check or money order payable to the Secretary of State. Articles received without the appropriate fee will not be accepted for filing. Please do not send cash. <b>NOTICE:</b> There is a \$25 service fee for all checks returned by your financial institution. <b>Also, to expedite processing, please do not use staples on your documents or to attach checks.</b>
<input type="checkbox"/> <b>Resident agent</b>	Any of the following may serve as a resident agent: a. the corporation itself, b. an individual residing in Kansas, c. a Kansas corporation, limited partnership, limited liability company or business trust, or d. a foreign corporation, limited partnership, limited liability company or business trust authorized to do business in Kansas.
<input type="checkbox"/> <b>Mailing address</b>	This filing only changes the resident agent and/or registered office. If you wish to change the mailing address (where our office will send official mail), please submit Form MA, available at <a href="http://www.sos.ks.gov">www.sos.ks.gov</a> .

**RO**  
53-06

**KANSAS SECRETARY OF STATE**  
**Change of Registered Office or**  
**Agent by a Corporation**

**Kansas Office of the Secretary of State:**

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

THIS SPACE FOR OFFICE USE ONLY.

**Instructions: All information must be completed or this document will not be accepted for filing.**

**1. Business entity ID number:**

Not Federal Employer ID Number (FEIN).

**2. Name of corporation:**

Must match name on record with Secretary of State.

**3. State/Country of organization**

**4. New name of resident agent and address of registered office in Kansas**

Must be a Kansas street address. A P.O. Box is unacceptable.

Name

Street Address

City

State

**KS**

Zip

**5. I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct and that I have remitted the required fee.**

Signature of Authorized Officer

Name of Signer (Printed or Typed)

Month

Day

Year