

Please
Do Not
Staple

CDL
53-81

KANSAS SECRETARY OF STATE
**Certificate of Division of a
Kansas Limited Liability Company**

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

GENERAL FILING INSTRUCTIONS

<input type="checkbox"/> Filing fee	The filing fee for this document is \$75 , plus the \$165 filing fee for each resulting LLC's articles of organization.
<input type="checkbox"/> Payment	<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. Please do not send cash.</p> <p>Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:</p> <p>Credit card number _____</p> <p>Billing zip code _____ Expiration date _____</p> <p>NOTICE: There is a \$25 service fee for all returned checks.</p>
<input type="checkbox"/> Daytime phone and contact person	_____
<input type="checkbox"/> Fax filing available	<p>Documents may be fax filed for a processing fee of \$20 in addition to the 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 Business Services, 785-296-4570. Faxed documents will receive that day's file date if they are without errors and received prior to 4 PM CST. Fax filing does not guarantee same day activation or return faxing.</p> <p>Processed documents will be returned by mail. You may request a file-stamped copy be faxed for an additional \$1 per page.</p>
<input type="checkbox"/> No duplicate copies	Please do not send duplicate copies of documents. The original is processed, file stamped and returned by mail to the address provided.
<input type="checkbox"/> No email	Filings are not accepted by email.
<input type="checkbox"/> No filing by phone	No documents or reports can be filed with our office by phone.
<input type="checkbox"/> Public Information	All information filed with our office is available to the public, and much of it may be viewed online without cost. Please consider this when providing information on our forms.

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CDL FORM INSTRUCTIONS

Question on Form

1. Name of dividing company	The dividing company is a domestic limited liability company that is effecting a division.
Surviving company	The surviving company is a dividing company that survives the division. Note: A certificate of division shall act as a certificate of cancellation for a dividing company that is not a surviving company.
2. Resulting company	A resulting company is a domestic limited liability company formed as a consequence of a division. Articles of organization and filing fees must be included for each resulting company.
3. Division contact	A division contact means, in connection with any division, a natural person who is a Kansas resident, any division company in such division or any other domestic limited liability company or other domestic entity as defined in K.S.A. 2018 Supp. 17-78-102, and amendments thereto.
4. Effective date	If the certificate of division and articles of organization for each resulting company are not to become effective upon their filing, then each such certificate shall provide for the same future effective date or time. A future effective date cannot be more than 90 days after the date the certificate of division is filed.
8. Signature(s)	The certificate of division requires the signature of one or more authorized persons on behalf of the surviving company, if any, or any other resulting company.

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Memorial Hall, 1st Floor
120 S.W. 10th Avenue
Topeka, KS 66612-1594

(785) 296-4564
kssos@ks.gov
https://sos.kansas.gov

THIS SPACE FOR OFFICE USE ONLY.

1. Name of dividing company:

Name of company as currently on record with the Secretary of State
Name of company under which its articles of organization were filed, if name has changed:

Will the dividing company survive?

Yes No
(If no, this certificate of division shall act as a certificate of cancellation for the dividing company.)

2. Name of each resulting company:

(Articles of organization and filing fee for each resulting company must be included with this filing.)

If additional space is needed, please provide attachment.

Name of Limited Liability Company
Name of Limited Liability Company
Name of Limited Liability Company
Name of Limited Liability Company
Name of Limited Liability Company

3. Name of business address of the division contact:

Name of Division Contact		
Street Address		
City	State	Zip

4. Effective date of division:

(Must be the same date for all documents filed.)

<input type="checkbox"/> Upon filing	<input type="checkbox"/> Future effective date: (Cannot be later than 90 days after the date this certificate is filed.)	Month	Day	Year
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5. The division has been consented to or approved in accordance with 2019 Session Laws of Kansas, Chapter 47.

6. The plan of division is on file at a place of business of such surviving or resulting company at the following address:

Company Name		
Street Address		
City	State	Zip

7. A copy of the plan of division will be furnished by such surviving or resulting company, on request and without cost, to any member of the dividing company.

8. I/We declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct.

(Signature of one or more authorized persons on behalf of the surviving company, if any, or any other resulting company is required.)

Signature of Authorized Person of Surviving or Resulting Limited Liability Company	Name of Surviving or Resulting Limited Liability Company
Signature of Authorized Person of Surviving or Resulting Limited Liability Company	Name of Surviving or Resulting Limited Liability Company