

INSTRUCTIONS FOR FILING ARTICLES OF INCORPORATION

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Note: All documents filed by the Secretary of State's office are considered public record and may be viewable online.

How to complete the Articles of Incorporation for a domestic (Kansas) entity:

Before proceeding, a certificate from a Kansas regulatory board for each profession stated within the purpose statement (section 7) must be submitted with the articles of incorporation (Form DPA). Each certificate submitted will name those who are licensed for the stated profession, each name of which must match to an incorporator named in section 9, and will indicate that the Kansas board has approved the corporation's name (section 2).

Each of the numbered instructions below corresponds to a section on the form.

- 1. Indicate if the business entity will be for-profit or not-for-profit.
- Provide the name of the corporation. All professional associations must contain a word of formation at the end of the name. Pursuant to K.S.A. 17-2711, that word must be one of the following:

CHARTERED, PROFESSIONAL ASSOCIATION, P.A., OR PA.

The corporation's name must match identically to the name approved by the Kansas regulatory board within the certificate.

Check to see if the name of the covered business entity is in use by any other business entity already registered with our office online at https://www.sos.ks.gov/eforms/BusinessEntity/NameAvailability.aspx.

If the name is currently in use, either a Written Consent to Use of Similar Business Name or a letter advertising must be submitted with the formation document.

Consent to Use of Similar Business Name: Pursuant to K.S.A. 17-7918, the business may submit a Written Consent to Use of Similar Business name (Form CN), completed by the business registered with the Secretary of State's office, found at https://www.sos.ks.gov/forms/business_services/CN.pdf.

3. Provide the name of the resident agent.

Resident agent: This is either an individual or a business entity registered in Kansas (may be the business entity the articles of incorporation are for) who will receive any legal documents (e.g., subpoenas, court orders, summons, etc.) for the business entity named in section 2. If the resident agent is a business entity, search for the legal name of the business at https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx.

4. Provide the registered office for the resident agent.

Registered office: Must be an address in Kansas where the resident agent may be regularly present. The address must include the building number, street, city, state, and zip code. This can't be a PO box.

- 5. Provide the corporation's purpose statement. This statement is a general indication as to the nature of business of the business entity. Within the purpose statement, each professional service that will be rendered by the incorporators must be stated and must match to a professional service stated within the certificate from a Kansas regulatory board.
- 6a. Provide a response indicating either that the business entity will be a stock corporation or a nonstock corporation.
- 6b. If the corporation is a stock corporation as indicated in section 6a, the total number of shares and the par value of those shares are required. If there are multiple classes of stock, each class must be indicated with the total number of shares and the par value.
- 7. Provide the names and postal addresses of each of the incorporators. Each of the names of the incorporators must match to the name of a licensee on a certificate issued by the Kansas regulatory board and must sign in section 9.
- If the power of the incorporator(s) is to cease upon the filing of the articles of incorporation, then the names and addresses of the directors must be provided. Otherwise, leave this section blank.
- 9. Each of the incorporators named in section 8 must sign.



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Fee Schedule

Articles of Incorporation

The filing fee for the articles of incorporation is as follows:

For-profit Professional Association paper filing:	\$90
Not-for-profit Professional Association paper filing:	\$20

Mail to:

Kansas Secretary of State Memorial Hall, 1st Floor 120 SW 10th Avenue Topeka KS 66612

Checks and credit/debit cards are accepted for payment. Make checks payable to the Kansas Secretary of State. Once processing the articles of incorporation are completed, a certified copy of the articles of incorporation will be mailed to the address of the sender.



COVER PAGE ARTICLES OF INCORPORATION

Note: The credit/debit card information will be destroyed upon the filing of the document.

Contact Information	
Contact Person	
Direct Phone Number for Contact Person	
Payment Information	
Credit/Debit Card Number	
Expiration Date	
Billing Zip Code	



KANSAS SECRETARY OF STATE Articles of Incorporation Domestic (Kansas) Professional Association



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

This form must be accompanied by the correct filing fee and at least one certificate from a Kansas regulatory board, or the document will not be accepted for filing. (See instructions for details.)

1.	Indicate type of entity:		For-profit profession ass (fee \$90) 51-04	ociation		(fee \$20 (If the e	or-profit professional association 0) 51-34 untity intends to seek 501(c)(3) status with
							, include the IRS-compliant 501(c)(3) addendum page.)
	Name of corporation:	П					
 -	Include word of formation. See instructions for allowed words.						
3.	Name of resident agent:						
	Must be an individual, the business entity named in section 2, or an entity already registered with our office. Do not leave blank .						
		Ctra	at Address (A DO Bay is unassentable)				
4.	Registered office in Kansas for the resident agent:	Stree	et Address (A PO Box is unacceptable)				
	Must be a street, rural route,	City			State		Zip
	or highway. A PO box is unacceptable.				KS		
5.	Nature of corporation's						
	business or purpose:						
	Must state the professional purpose of the business entity.						
62							
Ja	have the authority to issue capital stock?		Yes (Continue with 6b)	☐ No (Contine	ue with	າ 7)	

6b. If authorized to issue stock, indicate the number of shares authorized:		hares Class		Par Value /ea.		
		Shares Class		Par Value		
	autilorizeu.					/ea.
		Shares	Clas	s		Without Nominal or Par Value
		Shares	Clas	s		Without Nominal or Par Value
7.	Name and mailing address of each incorporator:	Name				
	The name of each incorporator must match to a name provided within an accompanying Kansas					
	regulatory board certificate.	City		State	Zip	Country
	Each incorporator must sign in section 9.	Name				
	Do not leave blank.	Address				
	If additional space is needed, please provide attachment.	City		State	Zip	Country
 8.	Name and mailing	Name				
٠.	address of each member of board of					
-	address of each member of board of directors:	Address				
0.	address of each member of board of	Address		State	Zip	Country
	address of each member of board of directors: This must be completed if incorporator's power terminates			State	Zip	Country
	address of each member of board of directors: This must be completed if incorporator's power terminates	City		State	Zip	Country
	address of each member of board of directors: This must be completed if incorporator's power terminates	City		State	Zip	Country
9.	address of each member of board of directors: This must be completed if incorporator's power terminates once document is filed. If additional space is needed, please provide attachment. I/We declare under penal correct.	City Name Address	s of t	State	Zip	Country
9.	address of each member of board of directors: This must be completed if incorporator's power terminates once document is filed. If additional space is needed, please provide attachment. I/We declare under penal correct.	City Address City Ity of perjury pursuant to the laws	s of t	State	Zip	Country
9. Sign	address of each member of board of directors: This must be completed if incorporator's power terminates once document is filed. If additional space is needed, please provide attachment. I/We declare under penal correct. (Signatures must correspond to reature of Incorporator	City Address City Ity of perjury pursuant to the laws	s of t	State	Zip	Country
9. Sign	address of each member of board of directors: This must be completed if incorporator's power terminates once document is filed. If additional space is needed, please provide attachment. I/We declare under penal correct. (Signatures must correspond to records)	City Address City Ity of perjury pursuant to the laws	s of 1	State	Zip	Country