

**FBT**

KANSAS SECRETARY OF STATE  
**Foreign (non-Kansas) Business Trust  
Application**

## INSTRUCTIONS FOR FILING FOREIGN BUSINESS TRUST APPLICATION

**SUBMIT THE DOCUMENTS  
WITHOUT THIS PAGE**

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

**How to complete the Foreign (non-Kansas) Business Trust Application:**

Before proceeding, a copy of the trust instrument will need to be submitted with the business trust application. The application can't be accepted without the trust instrument.

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

**1. Provide the name of the business trust.**

The name of the business trust on the application must be identical to the name of the business trust as it appears on the copy of the trust instrument.

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](https://www.sos.ks.gov/forms/business_services/CN.pdf).

**2. Provide the jurisdiction where the covered business entity organized. This must be either a U.S. state, U.S. territory, or foreign country.**

**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 business trust application is for) who will receive any legal documents (e.g., subpoenas, court orders, summons, etc.) for the business entity named in section 1. 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 date the covered business entity began doing business in Kansas. This field may be left blank if this date would be the date the application is filed with the Kansas Secretary of State's Office. This date determines if information reports must be filed with the business trust application.**

Information report: This is a document that is filed every two years to maintain good standing with the Kansas Secretary of State. If an even year was entered in section 6, the information report would have been filed every following even year, and if an odd year was entered in section 6, the information report would have been filed every following odd year. Each of the information reports that have not been filed up to the last 10 years must be submitted with the business trust application.

**6. Provide the names and addresses of each of the trustees.**

**7. The irrevocable consent to service of process must be signed by every trustee of the business trust. An attachment may be provided if more space is needed.**

**8. A signature from a trustee must certify that the resolution is a true and correct copy of the original.**

**9. The business trust application must be signed by an authorized person for the business entity.**

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**Fee Schedule**

**Business Trust Application**

The filing fee for the business trust application is as follows:

Business Trust Application:..... \$65

A one-time penalty fee of \$85 must be submitted if one or more information reports are being filed after the entity's forfeiture date. Forfeiture dates are 3 months after the end of the reporting period.

If information reports are being submitted, the filing fee for each must also accompany the information reports. The filing fee for a business trust information report is as follows:

Business Trust: .....IBT..... \$110

**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. Once processing the business trust application is completed, a certified copy of the business trust application will be mailed to the address of the sender.

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**COVER PAGE  
FOREIGN BUSINESS TRUST  
APPLICATION**

*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**

**FBT****KANSAS SECRETARY OF STATE  
Foreign (non-Kansas) Business Trust  
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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.ks.gov>

**A copy of the trust instrument with all amendments must accompany the application.**

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

**1. Name of business trust:**

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**2. State or foreign country  
of jurisdiction:**

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**3. Name of resident agent:**

Must be an individual, the  
business entity named in section  
1, or an entity already registered  
with our office. **Do not leave  
blank.**

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**4. Registered office in  
Kansas for the resident  
agent:**

Must be a street, rural route,  
or highway. **A PO box is  
unacceptable.**

Street Address (A PO Box is unacceptable)			
City	State	Zip	
	KS		

**5. Date the business trust  
began doing business in  
Kansas:**

Provide a date only if this date  
is in the past. Otherwise leave  
blank.

Month	Day	Year

**6. Name and mailing  
address of trustees:**

**Do not leave blank.**

If additional space is needed,  
please provide attachment.

Name			
Address			
City	State	Zip	Country
Name			
Address			
City	State	Zip	Country

**7. Irrevocable Consent**

This business trust hereby irrevocably consents that actions may be commenced against it in the proper court of any county where there is proper venue by the service of process on the secretary of state as provided for in K.S.A. 60-304, and amendments thereto, and stipulates and agrees that such service shall be taken and held, in all courts, to be as valid and binding as if due service had been made upon the governors of the foreign covered entity;

Signature(s) of Trustee(s) (All trustees must sign consent)

X	X
X	X
X	X

**8. I certify that this resolution is a true and correct copy of the resolution adopted by the trustees.**

Signature of Trustee

X

**9. I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct.**

Signature of Authorized Person

X