

**GL**

KANSAS SECRETARY OF STATE  
**Statement of Denial**  
**Limited Liability Partnership**  
**General Partnership**

**INSTRUCTIONS FOR FILING  
STATEMENT OF DENIAL**

**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 Statement of Denial for a limited liability partnership or general partnership:**

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

1. List the business's ID number issued by the Kansas Secretary of State (This is not a tax ID number). If the business is a general partnership that hasn't registered with the Kansas Secretary of State's Office, leave this section blank. ID numbers may be found by clicking on our website at <https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx>.
2. Provide the complete legal business name, including words of formation (e.g., LLP, Limited Liability Partnership, etc.)
3. State the fact that is being denied (e.g., "the partner of the partnership is...")
4. The partner submitting the Statement of Denial must sign.

**Fee Schedule**

**Statement of Denial**

The filing fee for the Statement of Denial is as follows:

LLP paper filing:..... \$35  
General partnership paper filing: ..... \$35

**Mail to:**

Kansas Secretary of State  
Docking State Office Building  
915 SW Harrison Street  
Topeka KS 66612

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

# CREDIT/DEBIT CARD COVER PAGE

ONLY INCLUDE **ONE** CREDIT/DEBIT CARD COVER PAGE  
WHEN SUBMITTING MULTIPLE DOCUMENTS.

THE CREDIT/DEBIT CARD CAN BE CHARGED FOR ALL FEES DUE.

*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

Name on Card

Credit/Debit Card Number

Expiration Date (MM/YY)

CVV (3 or 4 digit security code on back of card)

Billing Zip Code

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**Kansas Secretary of State**

Docking State Office Building  
915 SW Harrison Street  
Topeka, KS 66612

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

**A partner may file a statement of denial, stating the name of the partnership and the fact that is being denied, which may include denial of a person's authority or status as a partner.**

**1. Business ID/file number:**

Kansas Secretary of State  
issued file number.

**2. Name of business:**

Must match name on record with  
the Kansas Secretary of State.

**3. The fact that is being denied is as follows:**

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

Signature of Partner

X