

**RD**

KANSAS SECRETARY OF STATE  
**Certificate of Revocation of Dissolution  
Corporation**

## INSTRUCTIONS FOR FILING CERTIFICATE OF REVOCATION

**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 certificate of revocation of dissolution for a domestic (Kansas) corporation:**

Before proceeding, the certificate of revocation of dissolution may only be filed for domestic (Kansas) corporations and is only filed if a dissolution has been filed within the last three years.

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

1. List the business entity's ID number issued by the Kansas Secretary of State (This is not a tax ID number). ID numbers may be found by clicking on Business Entity Database at <https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx>.

2. Provide the complete legal business entity name, including words of formation (e.g., Inc., Corp., etc.)

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 letter of consent from the current business entity must be submitted with the document, or a different name must be used. If a new name must be used, provide the current name, indicate the name is changing, and provide the new name.

Letter of consent: Pursuant to K.S.A. 17-7933, the letter of consent must include an indication that the current business entity consents to the use of the name. This letter must be executed by an authorized person for the current business entity registered.

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 certificate of revocation of dissolution is 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.

- 5a. Each name of the officer of the corporation must be listed and the address where they may be regularly located.
- 5b. Provide each name of the directors of the corporation along with the address where they may be regularly located. The directors may be omitted if the officers are the same individuals.
6. An authorized person on behalf of the business entity must sign.

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**Fee Schedule**

**Certificate of Revocation of Dissolution**

The filing fee for the certificate of revocation of dissolution is as follows:

Corporation:

For-profit: \$35

Not-for-profit: \$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 certificate of revocation of dissolution is completed, a certified copy of the certificate of revocation of dissolution will be mailed to the address of the sender.

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**COVER PAGE  
CERTIFICATE OF REVOCATION**

*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 (MM/YY)**

**Billing Zip Code**

**RD****KANSAS SECRETARY OF STATE  
Certificate of Revocation of Dissolution  
Corporation**Memorial Hall, 1st Floor  
120 S.W. 10th Avenue(785) 296-4564  
kssos@ks.gov

**This certificate of revocation of dissolution must be filed prior to the expiration of three years following the dissolution or prior to the expiration of time directed by a court.**

**1. Business entity ID number:**Kansas Secretary of State  
issued file number.**2. Name of corporation:**Must match name on record with  
the Secretary of State.**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.****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

**KS**

Zip

**5a. Name and address  
of each officer of  
corporation:****Address required for  
each officer name.****Do not leave blank.**If additional space is needed,  
please provide attachment .

Name

Address

City

State

Zip

Country

Name

Address

City

State

Zip

Country

Name

Address

City

State

Zip

Country

**Please continue to next page.**

**5b. Name and address of each director of corporation:**

**Leave this question blank if the directors and officers are the same.**

If additional space is needed, please provide attachment .

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

**A majority of the stock of the corporation that was outstanding and entitled to vote upon a dissolution at the time of its dissolution have voted in favor of a resolution to revoke the dissolution, or that, if applicable, in lieu of a meeting and vote of stockholders, the stockholders have given their written consent to the revocation in accordance with K.S.A. 17-6518, and amendments thereto.**

**6. 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