

KANSAS SECRETARY OF STATE

Certificate of Reinstatement **Limited Liability Company, Limited Liability** Partnership, or Limited Partnership

## INSTRUCTIONS FOR FILING CERTIFICATE OF REINSTATEMENT

## 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 reinstatement for a limited liability company, limited liability partnership, or limited partnership:

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., LLC, LP, etc.)

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

Foreign business entities only: If the business entity is a foreign business entity and the name is currently in use, the business entity will need to choose one of three options:

- a. Submit the certificate of reinstatement with a letter of consent.
  - 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.
- b. Submit the certificate of reinstatement with a letter of advertising.
  - Letter of advertising: Pursuant to K.S.A. 17-7933, a letter of advertising must indicate that, in all means of identification and advertising, the business entity will identify as an entity out of their foreign (non-Kansas) state. If the current covered entity is domesticated in the same foreign state, a letter of advertising can't be used and a letter of consent from the current business entity must be provided.
- c. Provide the current name, indicate that the business entity's name has changed, and provide the new name of the business entity.

Domestic business entities only: If the business entity is a domestic business entity and the name is currently in use, the business entity will need to choose one of two options:

- a. Submit the certificate of reinstatement with a letter of consent.
  - 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.
- b. Provide the current entity name, indicate that the business entity's name has changed, and provide the new name of the business entity.
- 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 reinstatement 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.

- 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. An authorized person on behalf of the entity must sign.





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#### Fee Schedule

#### **Certificate of Reinstatement**

The filing fee for the certificate of reinstatement is as follows:

All Entity Types:.....\$35

If the business entity forfeited for failure to file an information report, a one-time penalty fee of \$85 must be submitted with the certificate of reinstatement and the information reports.

The information reports and filing fees for each must also accompany the certificate of reinstatement. Each of the information reports that have not been filed within the reporting period that would have been due, limited to the last 10 years of information reports, must be submitted with the reinstatement.

For more information and to download the information reports, go to https://www.sos.ks.gov/businesses/information-reports.html.

#### 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 reinstatement is completed, a certified copy of the certificate of reinstatement will be mailed to the address of the sender.



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# **COVER PAGE** CERTIFICATE OF REINSTATEMENT

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	



# KANSAS SECRETARY OF STATE Certificate of Reinstatement Limited Liability Company, Limited Liability Partnership, or Limited Partnership



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

Note: The certificate of reinstatement must be submitted with all information reports and fees due from the time of forfeiture. (See instructions for details.)

1.	Business entity ID number:						
	Kansas Secretary of State issued file number.						
	Name of business antitu						
۷.	Name of business entity:						
	Must match name on record with the Secretary of State at the time of forfeiting.						
 3.	Name of resident agent:						
	Must be an individual, the business entity named in section 2, or an entity already registered with our office. <b>Do not leave blank.</b>						
4.	Registered office in Kansas for the resident agent:	Street Address (A PO box is unacceptable)					
	Must be a street, rural route, or highway. A. PO box is unacceptable.						
		City		State KS	Zip		
pa for for Th	rtnership's certificate of par feited for failure to timely fi feited for failure to designa	rtnership, or the foreig le an information reporte te or maintain a reside or more persons of the	n entity's application for rt and pay the information ent agent and registered e limited liability compa	r authority on report fo office. ny, limited	atement of qualification, limited to do business in Kansas has been ee or franchise tax, or has been liability partnership, or limited		
5.	I declare under penalty o	f perjury pursuant to th	he laws of the state of K	ansas that	the foregoing is true and correct.		
Sig	nature of Authorized Person						
X							
1 ' `							

Please review to ensure completion.