

Please
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KANSAS SECRETARY OF STATE
**Certificate of Restoration
Corporation**

**INSTRUCTIONS FOR FILING
CERTIFICATE OF RESTORATION**

**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 restoration for a domestic (Kansas) corporation:

Before proceeding, the certificate of restoration may only be filed for domestic (Kansas) corporations and is only filed if the business entity has expired within the last three years.

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

1. List the 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/Search.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 a 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 restoration 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. Either indicate that the corporation will not have an expiration date by indicating that the corporation shall be perpetual or indicate that the corporation has a new expiration date and provide that date.
7. An authorized person on behalf of the entity must sign.

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Fee Schedule

Certificate of Restoration

The filing fee for the certificate of restoration 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 restoration is completed, a certified copy of the certificate of restoration will be mailed to the address of the sender.

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**COVER PAGE
CERTIFICATE OF RESTORATION**

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

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Memorial Hall, 1st Floor
120 S.W. 10th Avenue
Topeka, KS 66612-1594

(785) 296-4564
kssos@ks.gov
www.sos.ks.gov

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

1. Business entity ID number:

Kansas Secretary of State issued file number.

[Empty field for Business entity ID number]

2. Name of corporation:

Must match name on record with the Secretary of State.

[Empty field for Name of corporation]

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.

[Empty field for Name of resident agent]

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		

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

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

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

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

If additional space is needed, please provide attachment .

6. Duration of corporation upon restoration:

<input type="checkbox"/> The corporation shall be perpetual	OR	<input type="checkbox"/> The corporation's expiration date shall be:	Month	Day	Year

A majority of the stock of the corporation that was outstanding and entitled to vote upon an amendment to the articles of incorporation to change the period of the corporation's duration at the time of expiration by limitation have voted in favor of a resolution to restore the articles of incorporation, or that, if applicable, in lieu of a meeting and vote of stockholders, the stockholders have given their consent to the restoration in accordance with K.S.A. 17-6518, and amendments thereto.

7. 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