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FA

**KANSAS SECRETARY OF STATE
Application for Registration of
Foreign Covered Entity**

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

**GENERAL FILING
INSTRUCTIONS**

| | |
|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>■ Filing fee</p> | <p>The filing fee for this document is \$115 or \$165, depending on the entity type.</p> |
| <p>■ Payment</p> | <p>Please submit payment by check, money order, or credit card. Checks and money orders need to be made payable to the Secretary of State. Forms received without the appropriate fee will not be accepted for filing. Please do not send cash.</p> <p>Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:</p> <p>Credit card number _____</p> <p>Billing zip code _____ Expiration date _____</p> <p>NOTICE: There is a \$25 service fee for all returned checks.</p> |
| <p>■ Daytime phone and contact person</p> | <p>_____</p> |
| <p>■ Fax filing available</p> | <p>Documents may be fax filed for a processing fee of \$20 in addition to the normal filing fee. Include contact name, daytime phone number, credit card number, credit card expiration date and billing zip code.</p> <p>Fax documents and payment information to Business Services, 785-296-4570. Faxed documents that are without errors and received prior to 4:00 p.m. CT will receive that day's file date. Faxed documents received after 4:00 pm CT cannot be guaranteed to receive that day's filing date.</p> <p>Filed documents will be returned by mail. You may request a file-stamped copy be faxed for an additional \$1 per page. Fax filing does not guarantee same day return faxing.</p> |
| <p>■ No duplicate copies</p> | <p>Please do not send duplicate copies of documents. The original is processed, file stamped and returned by mail to the address provided.</p> |
| <p>■ No email</p> | <p>Filings are not accepted by email.</p> |
| <p>■ No filing by phone</p> | <p>No documents or reports can be filed with our office by phone.</p> |
| <p>■ Public information</p> | <p>All information filed with our office is available to the public, and much of it may be viewed online without cost. Please consider this when providing information on our forms.</p> |

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FA FORM INSTRUCTIONS

Note: Any foreign covered entity (for profit corporation, not for profit corporation, limited liability company, series limited liability company, limited partnership, or limited liability partnership) may use this form to apply for authority or qualification in Kansas.

Question on Form

1. Foreign covered entity name

The foreign covered entity name on all documents must be **exactly** the same as it appears on the certificate, including punctuation. If the entity applying for authority has the same name as an entity already on file, you may do **one** of the following:

- Include a letter of consent from the existing entity to use the name.
- Include a letter stating that the foreign covered entity will list its home state as a means of identification and in its advertising in the state of Kansas.

The name requirements for foreign covered entities are governed by K.S.A. 17-7933. You may view statutes at www.ksrevisor.org.

3. Date of formation in home state

The home state may include this date on the certificate of good standing/existence. Please use the date provided by the home state.

4. Original certificate of good standing/existence

The certificate must be an original. We will accept online certificates with a verification code if the home state offers those. We will not accept screen shots of an entity's status.

* [Click here to see each state/jurisdiction's certificate and issuing agency.](#)

5. Date entity began doing business in Kansas

Indicate the date the entity began doing business in Kansas if **prior** to the filing date. If the entity began doing business in Kansas more than six months prior to its fiscal year end (question 8), it may owe annual reports and fees with the application. If more than two annual reports are due, or if more than 7 months and 15 days have passed from the most recent fiscal year end due and the date of the application, a penalty fee* of \$85 applies to the application fee. All application fees, penalty fees and annual report fees may be paid with one check.

Example: An entity with a fiscal year end of December that was doing business in Kansas prior to July 1 of the previous year would include one annual report and its filing fee with the application.

To determine reports and fees due, see FA-I Annual Report Fee Schedule attachment for for-profit entities and not-for-profit corporations.

*Penalty fees do not apply to not-for-profit corporation applications with annual reports due.

6. Resident agent

The resident agent is a person or an entity registered with the Kansas Secretary of State that is authorized to accept service of process (lawsuits) on behalf of the business entity. This does not mean the agent is being sued, but that the agent has the authority and responsibility to accept service of process on behalf of the business.

Registered office

The registered office is the Kansas *street* address where the resident agent is located.

11a. Series LLCs

This statement applies only if the application is for a series limited liability company.

11b. LLPs

This statement applies only if the application is for a limited liability partnership.

12. Signature

The signer of the application may be whatever governor (officer, director, authorized person, or partner) with authority according to the organic documents of the entity in its home state. There is no need to list a title with the signature.

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ANNUAL REPORT FEE SCHEDULE

For-profit entities:

Corporations (use annual report **Form AR**)

Limited liability companies (use annual report **Form LC**)

Limited liability partnerships (use annual report **Form LLP**)

Limited partnerships (use annual report **Form LP**)

To determine fees and/or franchise taxes owed, please refer to the chart below for the tax years for which the entity is filing past due annual reports.

Annual reports with tax year ending DECEMBER 2004 TO PRESENT:

Franchise tax calculation: N/A

Minimum amount: \$55 flat filing fee

Maximum amount: \$55 flat filing fee

Annual reports with tax year ending 2001 TO NOVEMBER 2004:

Franchise tax calculation: \$2 for every \$1,000 of net worth

Minimum amount: \$55

Maximum amount: \$5015

Annual reports with tax year ending PRIOR AND UP TO 2000:

Franchise tax calculation: \$1 for every \$1,000 of net worth

Minimum amount: \$35

Maximum amount: \$2515

Not-for-profit corporations (use annual report **Form NP**):

To determine fees owed, please refer to the chart below for the tax years for which the corporation is filing past due annual reports.

Annual reports with tax year ending 2001 TO PRESENT:

Fee amount: \$40 flat filing fee

Annual reports with tax year ending 1993 TO 2000:

Fee amount: \$20 flat filing fee

Annual reports with tax year ending 1972 TO 1992:

Fee amount: \$5 flat filing fee

Annual reports were not filed for not-for-profit corporations PRIOR TO 1972.

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KANSAS SECRETARY OF STATE
Application for Registration of
Foreign Covered Entity

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

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

THIS SPACE FOR OFFICE USE ONLY.

All information on the application for registration must be complete and accompanied by the correct filing fee or the document will not be accepted for filing. **A certificate of existence or good standing from the home state must accompany the application.**

Choose type of covered entity:

Corporation for profit
(fee \$115) 51-03

Series limited liability company
(fee \$165) 51-33
(Complete statement 11a, if applicable)

Corporation not for profit
(fee \$115) 51-17

Limited partnership
(fee \$165) 51-06

Limited liability company
(fee \$165) 51-10

Limited liability partnership
(fee \$165) 51-18
(Statement 11b applies)

1. Name of covered entity:

Must *exactly* match name on certificate.

2. State or foreign country of origin:

3. Date of formation in home state:

| | | |
|-------|-----|------|
| Month | Day | Year |
|-------|-----|------|

4. **Include a statement (certificate of good standing/existence*) issued within 90 days of the application** by the proper officer of the jurisdiction where such foreign entity is organized (usually the Secretary of State or comparable agency) that the entity exists in good standing under the laws of the jurisdiction of its organization.

* [Click here to see each state/jurisdiction's certificate and issuing agency.](#)

5. Date the covered entity began doing business in Kansas if *prior* to the filing date:

| | | |
|-------|-----|------|
| Month | Day | Year |
|-------|-----|------|

See FA-I #5 for additional filings and fees that may be due.

6. Name of resident agent and address of registered office in Kansas:

Must be a Kansas street address. A P.O. Box or Rural Route/Box is unacceptable.

| | | | |
|----------------|-------|-----|--|
| Name | | | |
| Street Address | | | |
| City | State | Zip | |
| | KS | | |

7. Mailing address:

Address will be used to send official mail from the Secretary of State's office

| | | | |
|----------------|-------|-----|---------|
| Attention Name | | | |
| Address | | | |
| City | State | Zip | Country |

8. Fiscal year end:

[Empty box for fiscal year end]

9. Full nature and character of business to be conducted in Kansas:

[Large empty box for business nature]

10. The foreign covered entity hereby consents, without power of revocation, that actions may be commenced against it in the proper court of any county in the state of Kansas; and the foreign covered entity stipulates and agrees that such service shall be taken and held in all courts to be valid and binding as if due service had been made upon the authorized persons of the foreign covered entity.

11a. This statement applies to foreign series limited liability companies only, and applies only if the series limited liability company is chosen as type of covered entity.

The limited liability company is governed by an operating agreement that establishes or provides for the establishment of a series of members, managers, limited liability company interests or assets having separate rights, powers or duties with respect to specified property or obligations of the foreign limited liability company or profits and losses associated with specified property or obligations.

Check all that apply:

The debts, liabilities and obligations incurred, contracted for or otherwise existing with respect to a particular series, if any, are enforceable against the assets of such series only, and not against the assets of the foreign limited liability company generally or any other series thereof.

Any of the debts, liabilities, obligations and expenses incurred, contracted for or otherwise existing with respect to the foreign limited liability company generally or any other series thereof shall be enforceable against the assets of such series.

11b. This statement applies to foreign limited liability partnerships only, and applies only if the foreign limited liability partnership is chosen as type of covered entity.

The above-named partnership elects to be a foreign limited liability partnership.

12. 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

Name of Signer (Printed or Typed)

X

Please note that information provided on documents filed with the Secretary of State is public record that is subject to public access and disclosure (per K.S.A. 45-215 through K.S.A. 45-223).