

KANSAS SECRETARY OF STATE

Certificate of Revocation of Dissolution

Corporation

INSTRUCTIONS FOR FILING CERTIFICATE OF REVOCATION OF DISSOLUTION

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.

- 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/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 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.



COVER PAGE CERTIFICATE OF REVOCATION OF DISSOLUTION

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 Revocation of Dissolution Corporation



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

1. Business entity ID

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

Street Address (A PO box is unacceptable)							
State KS	Zip						
Name and address of each officer of corporation:							
Zip	Country						
Name							
Address Do not leave blank.							
Zip	Country						
Name							
Address							
Zip	Country						
	Zip Zip	Zip Country					

5b.	Name and address of each director of corporation:	Name Address					
	•						
Leave this question blank if the directors and officers are the same.	City	State	Zip	Country			
		Name					
	Address						
		City	State	Zip	Country		
	Name						
	Address						
	If additional space is needed, please provide attachment .	City	State	Zip	Country		
diss vote	solution have voted in far	e corporation that was outstanding a wor of a resolution to revoke the diss ockholders have given their written c eto.	colution, or th	at, if applicable,	in lieu of a meeting and		
6. I	declare under penalty of	perjury pursuant to the laws of the	state of Kans	as that the foreg	oing is true and correct.		
Signat	ure of Authorized Person						