

## GENERAL FILING INSTRUCTIONS

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

Stay up-to-date on your organization's status, annual report due date and contact addresses by going to **www.sos.ks.gov**.

<input type="checkbox"/> <b>Filing fee</b>	The filing fee for this document is <b>\$165</b> .
<input type="checkbox"/> <b>Payment</b>	<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. <b>Please do not send cash.</b></p> <p><b>NOTICE: There is a \$25 service fee for all checks returned by your financial institution.</b></p> <p>Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:</p> <p><b>Credit card number</b> _____</p> <p><b>Billing zip code</b> _____ <b>Expiration date</b> _____</p>
<input type="checkbox"/> <b>Daytime phone</b>	_____
<input type="checkbox"/> <b>Fax filing available</b>	<p>Documents may be fax filed for a processing fee of <b>\$20 in addition</b> 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 <b>Business Services, 785-296-4570</b>. Faxed documents will receive that day's file date if they are without errors and received prior to 4 PM CST.</p> <p>Processed 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 activation or return faxing.</p>
<input type="checkbox"/> <b>Company name</b>	<p>A word of organization must be included in the name per K.S.A. 17-7673. Permitted words of organization are "Limited Company," "Limited Liability Company," or the abbreviation "L.C.," "L.L.C.," "LC" or "LLC." You may view statutes at <b>www.ksrevisor.org</b>.</p> <p><b>Kansas does not use "PLLC" designations.</b></p>
<input type="checkbox"/> <b>Resident agent</b>	The resident agent is a person or entity that is authorized to accept service of process (lawsuits) on behalf of the business entity. This does not necessarily mean that the agent himself/herself is being sued, but that he/she has the authority and responsibility to accept service of process on behalf of the business.
<input type="checkbox"/> <b>Registered office</b>	The registered office is the address where the resident agent is located.
<input type="checkbox"/> <b>Original certificate from the regulatory board</b>	The certificate must be issued by the state regulatory board for each member stating that they are licensed and that the business entity name is approved.
<input type="checkbox"/> <b>Purpose</b>	The articles must include a specific professional purpose (ex. Practice of Medicine).

**PDL**  
51-22

**KANSAS SECRETARY OF STATE**  
**Kansas Professional Limited Liability**  
**Company Articles of Organization**

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

Include a certificate from your State of Kansas regulatory board stating that each member is licensed and that the business entity name is approved.

THIS SPACE FOR OFFICE USE ONLY.

**Instructions: All information must be completed or this document will not be accepted for filing.**

**1. Name of limited liability company**

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**2. Name of resident agent and address of registered office in Kansas**

Must be a Kansas street address. A P.O. Box is unacceptable.

Name			
Street Address			
City	State	Zip	
	KS		

**3. Mailing address**

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

Attention Name			
Address			
City	State	Zip	Country

**4. Tax closing month**

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**5. State the professional purpose of the LLC**

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**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 Organizer	Month	Day	Year