

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

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 **https://sos.kansas.gov**.

□ Filing fee	The filing fee for this document is <b>\$165</b> .					
☐ Payment	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>					
	NOTICE: There is a \$25 service fee for all checks returned by your financial institution.					
	Visa, MasterCard, Discover, and American Express are accepted. To use a credit card, please provide the following information:					
	Credit card number					
	Billing zip code Expiration date					
Daytime phone and contact person						
☐ Fax filing available	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.					
	Fax documents and payment information to <b>Business Services</b> , <b>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.					
	Processed documents will be returned by mail. You may request a file-stamped copy be faxed for an ad- ditional \$1 per page. Fax filing does not guarantee same day activation or return faxing.					
No duplicate copies	Please do not send duplicate copies of your document. The original is processed, and returned to you by mail.					
□ No email	We cannot accept any filings by email, except for the MA mailing address change form.					
□ No filing by phone	No documents or reports can be filed with our office by phone.					
□ Public information	All documents filed with our office are available to the public and may be viewed online without cost. Please consider this when providing information on our forms. Instructions and payment information are shredded after use.					

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## PDL FORM

**Note:** This application must be accompanied by a certificate from the licensing body of the profession involved that each of the members is duly licensed to practice that profession and that the proposed company name has been approved.

## **Question on Form**

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1. Company name	A word of organization must be included in the name per K.S.A. 17-7920. Permitted words of organiza- tion are "Limited Company," "Limited Liability Company," or the abbreviation "L.C.," "L.L.C.," "LC" or "LLC." Kansas statutes can be reviewed at <b>www.ksrevisor.org</b> .				
2. Resident agent	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.				
Registered office	The registered office is the address where the resident agent is located.				
5. Professional purpose	The articles must include a statement of the specific professional purpose of the LLC (e.g., practice of medicine).				
6. Signature	The articles of organization require the signature of one or more authorized persons to form the limited liability company.				

**Effective Date:** Any document that is required by this act to be filed with the Secretary of State shall be effective upon its filing date. Any document may provide that it is not to become effective until a specified date subsequent to its filing date, but such date shall not be later than 90 days after its filing date.

If you wish to include a future effective date for your articles of organization that is not more than 90 days after filing with the Secretary of State, please add the following information at the bottom of the PDL form under Item 5 (signature block):

"Effective Date: \_\_/\_\_/\_\_\_."

	<b>PDL</b> 51-22	Professiona	ETARY OF STATE I Limited Liability Company Organization, Kansas	
120	0 S.W. 10	II, 1st Floor th Avenue 66612-1594	(785) 296-4564 kssos@ks.gov https://sos.kansas.gov	THIS SPACE FOR OFFICE USE ONLY.

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1.	Name of limited liability company:							
2.	Name of resident agent and address of	Name						
	registered office in Kansas:	Street Address						
	Must be a Kansas street address. A P.O. Box is							
	unacceptable.	City			State	Zip		
					KS			
3.	<b>Mailing address:</b> 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: (December is default)							
5.	State the professional purpose of the LLC:							
<b></b>								
6.	I declare under penalty of (The signature of one or more a					the forego	ing is true and correct.	
Signat	ture of Authorized Person							
<b></b>								

Signature of Authorized Person