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KANSAS SECRETARY OF STATE
Corrected Document

GENERAL FILING INSTRUCTIONS

The following form **must be complete** and accompanied by **the correct filing fee** or the document will **not** be accepted for filing.

Filing fee	Submit this form with the entire corrected document and the filing fee appropriate to the document being corrected.
Payment	<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>NOTICE: There is a \$25 service fee for all returned checks.</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>
Daytime phone and contact person	_____
No duplicate copies	Please do not send duplicate copies of your document. The original is processed, and returned to you by mail.
No email	Filings are not accepted by email.
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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Topeka, KS 66612-1594

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sos.ks.gov

1. Business entity ID/file number:

2. Name of covered entity:

Must match name on record with the Secretary of State.

3a. Specify the document to be corrected:

3b. Date the erroneous document was filed with Kansas Secretary of State:

Month	Day	Year
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3c. The inaccuracy needing correcting:

4. Attach the entire document in its corrected form.

5. 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