

KANSAS SECRETARY OF STATE Amendment to Certificate of Designation

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

GENERAL FILING INSTRUCTIONS

Filing fee	The filing fee for this document is \$35.					
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. Please do not send cash. 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 NOTICE: There is a \$25 service fee for all returned checks.					
Daytime phone and contact person	THORSE IS A \$25 Service fee for all retained checks.					
Fax filing available	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. 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. 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.					
No duplicate copies	Please do not send duplicate copies of documents. The original is processed, file stamped and returned by mail to the address provided.					
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 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.					
	Daytime phone and contact person Fax filing available No duplicate copies No email No filing by phone					

CDA

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

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	THIS SPACE FOR OFFICE USE ONLY.	

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1. Name of limited	· T						
liability company:							
Must match name on record with the Secretary of State.							
2. Name of series:	· T						
Must match name on record							
with the Secretary of State.							
3. Business entity ID/file number of series:							
Not Federal Employer ID							
Number (FEIN).							
	<u>L</u>						
1. The certificate							
of designation is amended as follows:							
If additional space is needed please provide an							
attachment.							
	, . L						
5. Effective date:		Upon filing with the		Future effective date:	Month	Day	Year
	-	Kansas Secretary		(Cannot be later than 90 days after			
		of State		the date this certificate is filed.)			
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I/We declare under pen correct. (The signature of or					is mai me	loregoing is	irue anu
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