

**CE**

**KANSAS SECRETARY OF STATE  
Certificate of Cancellation  
Domestic (Kansas) Limited Partnership**

**SUBMIT THE DOCUMENTS  
WITHOUT THIS PAGE**

**INSTRUCTIONS FOR FILING  
CERTIFICATE OF CANCELLATION**

**Note: All documents filed by the Secretary of State's office are considered public record and may be viewable online. File this document directly online at <https://www.sos.ks.gov/businesses/close-a-business.html>.**

**How to complete the Certificate of Cancellation for a domestic (Kansas) limited partnership:**

Before proceeding, the business's status must be either in good standing or showing as registered. Businesses in a forfeited status must first reinstate to file a cancellation. Check the status of the business online at <https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx>.

More information on reinstating can be found online at <https://www.sos.ks.gov/businesses/reinstate-a-business.html>.

Each of the numbered instructions below corresponds to a section on the form.

1. List the business's ID number issued by the Kansas Secretary of State (This is not a tax ID number). ID numbers may be found online at <https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx>.
2. Provide the complete legal business name, including words of formation (e.g., LP, Limited Partnership, etc.)
3. List the date the original Certificate of Limited Partnership was filed with our office. This date may be found online at <https://www.sos.ks.gov/eforms/BusinessEntity/Search.aspx>.
4. Provide the reason for filing the certificate of cancellation.
5. An authorized person on behalf of the business must sign.

**Fee Schedule**

**Certificate of Cancellation**

The filing fee for the certificate of cancellation is as follows:

Paper Certificate of Cancellation: .....\$35  
Online Certificate of Cancellation: .....\$30

**Filing Online**

The certificate of cancellation may be filed directly online at <https://www.sos.ks.gov/businesses/close-a-business.html>.

**Mail to:**

Kansas Secretary of State  
Docking State Office Building  
915 SW Harrison Street  
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 cancellation is completed, a certified copy of the certificate of cancellation will be mailed to the address of the sender.

# CREDIT/DEBIT CARD COVER PAGE

ONLY INCLUDE **ONE** CREDIT/DEBIT CARD COVER PAGE  
WHEN SUBMITTING MULTIPLE DOCUMENTS.

THE CREDIT/DEBIT CARD CAN BE CHARGED FOR ALL FEES DUE.

*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

Name on Card

Credit/Debit Card Number

Expiration Date (MM/YY)

CVV (3 or 4 digit security code on back of card)

Billing Zip Code

**CE**

**KANSAS SECRETARY OF STATE**  
**Certificate of Cancellation**  
**Domestic (Kansas) Limited Partnership**



**Kansas Secretary of State**  
 Docking State Office Building  
 915 SW Harrison Street  
 Topeka, KS 66612

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

**Note: The status of the business must be either in good standing or registered. Businesses in a forfeited status must first reinstate before submitting this document. See instructions for details.**

<b>1. Business ID/file number:</b> Kansas Secretary of State issued file number	
--	--

<b>2. Name of limited partnership:</b> Must match name on record with the Kansas Secretary of State.	
---	--

**The Kansas limited partnership hereby cancels its certificate.**

<b>3. The date of filing the certificate of limited partnership:</b>	Month	Day	Year
--	-------	-----	------

<b>4. Reason for cancellation:</b>	
------------------------------------	--

<b>5. I/We declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct.</b>	
Signature of Authorized Person X	Name of Signer (Printed or Typed)
Signature of Authorized Person X	Name of Signer (Printed or Typed)
Signature of Authorized Person X	Name of Signer (Printed or Typed)
Signature of Authorized Person X	Name of Signer (Printed or Typed)