



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

<input type="checkbox"/> Filing fee	The filing fee for this document is \$35 .
<input type="checkbox"/> 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>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> <p>NOTICE: There is a \$25 service fee for all returned checks.</p>
<input type="checkbox"/> Daytime phone and contact person	_____
<input type="checkbox"/> Fax filing available	<p>Documents may be fax filed for a processing fee of \$20 in addition to the 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 Business Services, 785-296-4570. Faxed documents will receive that day's file date if they are without errors and received prior to 4 PM CST. Fax filing does not guarantee same day activation or return faxing.</p> <p>Processed documents will be returned by mail. You may request a file-stamped copy be faxed for an additional \$1 per page.</p>
<input type="checkbox"/> 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.
<input type="checkbox"/> No email	Filings are not accepted by email.
<input type="checkbox"/> No filing by phone	No documents or reports can be filed with our office by phone.
<input type="checkbox"/> 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.



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Topeka, KS 66612-1594

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

53-14
THIS SPACE FOR OFFICE USE ONLY.

1. Name of limited liability company:

Must match name on record with the Secretary of State.

2. Name of series:

Must match name on record with the Secretary of State.

3. Business entity ID/file number of series:

Not Federal Employer ID Number (FEIN).

4. The certificate of designation is amended as follows:

If additional space is needed please provide an attachment.

5. Effective date:

Upon filing with the Kansas Secretary of State Future effective date: (Cannot be later than 90 days after the date this certificate is filed.)

Month	Day	Year

6. I/We declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct. (The signature of one or more authorized persons is required.)

Signature of Authorized Person

X

Signature of Authorized Person

X