

State of Missouri Denny Hoskins, Secretary of State

Corporations Division PO Box 778 / 600 W. Main St., Rm. 322 Jefferson City, MO 65102

	for a Fore	for Certificate of Authority ign For-Profit Corporation mit with filing fee of \$155.00)	
1. The corporation's name	is		
and it is organized and e	existing under the laws of		
2. The name it will use in 1	Missouri is		
3. The date of its incorpora	date of its incorporation was, and the period of its duration is		
4. The address of its princi	pal place of business is	Address	City/State/Zip
5. The name and physical	address of its registered agent	and office in the State of Missouri is	
Name	Ada	lress	City/State/Zip
7. The name of its officers	of its business in Missouri are and directors and their busine	ess addresses are as follows:	
Officers	Name	Address	City/State/Zip
-			
Board of Directors			
Director			
	(Pl	ease see next page)	
Name and address to retu	rn filed document:		
Name:			

City, State, and Zip Code: ____

8. The effective date of this document is the date it is filed by the Secretary of State of Missouri unless a future date is otherwise

indicated: __

(Date may not be more than 90 days after the filing date in this office)

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)

Must be an Officer or Chairman listed in #7

Printed Name

Date

Title

Note: A current (not more than 60 days old) original certificate of good standing or certificate of existence must be submitted with this application. This may be obtained from the Secretary of State or other authority that issues corporate charters in the state of domicile.