APPLICATION FOR CERTIFICATE OF AUTHORITY
Form CF-1
Rev. 09/2026

West Virginia Secretary of State
Business & Licensing Division
Tel: (304)558-8000 Fax:
(304)558-8381 Website:
www.wvsos.gov

FILE ONE ORIGINAL
(Two if you want a filed stamped copy returned to you.)
FILING FEE: $100 (profit)
$50 (non-profit)
*** Fee Waived for Veteran-owned corporation**

Control # _____

***** The undersigned, having authority to transact business on behalf of a foreign (out-of-state) *** registered entity, agrees to comply with the requirements of WV Code §31D-15 to apply for Certificate of Authority.**

1. **Home State Information:**
   a. The **name of the corporation** as it is registered in its home state is: _____
   b. **State of** _____ Date of Incorporation: _____ Duration (no. yrs. or perpetual): _____
   c. NAIC# (if an insurance company): _____

☐ **CHECK HERE to indicate you have obtained and submitted with this application a CERTIFICATE OF EXISTENCE (GOOD STANDING), dated during the current tax year, from your home state of original incorporation as required to process your application. The certificate may be obtained by contacting the Secretary of State's Office in the home state of original incorporation.**

2. **Principal Office Information:**
   a. **Principal office** address of the corporation is:
      No. & Street: _____
      City: _____ State: _____ Zip Code: _____
   b. **Mailing address**, if different from above address:
      Street/PO Box: _____
      City: _____ State: _____ Zip Code: _____

3. **West Virginia Office Information:**
   a. **Corporate name to be used in WV:**[The name must contain one of the required terms such as "**Corporation**," "**Corp.**" or "**Inc.**" See instructions for complete list of acceptable terms and requirements for use of Trade Name.]

   ☐ **Home state name as listed on line 1a. above**, if available. (If name is not available, check **DBA Name** box below and follow special instructions under Section 3a. attached to this application.)

   ☐ **DBA Name:** _____

   (See special instructions in **Section 3a.** regarding the **Letter of Resolution** approving use of a "forced **DBA Name**" attached to this application. View a sample Letter of Resolution.)

b. **Designated (physical) office address** in West Virginia, if any:

No. & Street: _____

City: _____ State: _____ Zip Code: _____

c. Located in the **County** of:

County: _____

d. **Mailing address** in West Virginia, if different from above:

Street/PO Box: _____

City: _____ State: _____ Zip Code: _____

4. **Agent for Service of Process**: Properly designated person or company to whom notice of legal process may be sent, if any.

Name: _____

No. & Street: _____

City: _____ State: _____ Zip Code: _____

5. **E-mail address** where business correspondence may be received: _____

6. **Website address** of the business, if any (*ex: yourdomainname.com*): _____

7. Do you **own or operate more than on business in West Virginia**? ☐ **Yes** * *Answer* **a. and b.** *below.* ☐ **No** ☐ **Decline to answer**

If "**Yes**"... a. How many businesses? _____ b. Located in how many West Virginia counties? _____

8. a. **Proposed purpose(s) for transaction of business in West Virginia is(are):** *NOTE - "Professional" business organizations must attach to this Certificate of Authority application the **Verification of Eligibility** (Form VOE) authorized by your professional state licensing board (*see attached instructions and* **CHECK BOX** *below*). [In the space below, describe the type(s) of business activity which will be conducted, for example, "agricultural production of grain and poultry," "construction of residential and commercial buildings." Purpose may conclude with words "…including the transaction of any or all lawful business for which corporations may be incorporated in West Virginia."]

_____

_____

☐ **Professional business organizations**: **CHECK BOX** indicating you have attached the state licensing board **Verification of Eligibility** (Form **VOE**) to this Certificate of Authority application if your profession meets the requirements as defined by **Chapter 30** of the WV Code. *See* **Section 8** *of the attached instructions for a list of professions.* **Your application will be rejected if the VOE signed by the board is not attached.**

b. Will the above purpose include any business activity conducted as a **consumer litigation financier** pursuant to WV Code §46A-6N?

☐ **YES** [By checking "Yes," the applicant affirms the above **purpose includes the required statement that the organization shall be designated as a litigation financier** pursuant to WV Code §46A-6N**.** You are also affirming that you have included with this application an original completed copy of the **required** Application for Registration as a Litigation Financier (Form LF-1) with the associated requisite filing fee.]

☐ **No** [Proceed to Section 8c.]

c. Will the incorporation elect to be organized for purposes as a "**Benefit Corporation**" per West Virginia Code §31F? **ONLY applicable to "FOR PROFIT" corporations; "NON-PROFIT" corporations CANNOT elect this status.**

☐ **Yes** [If "**Yes**," the corporation must be formed FOR PROFIT and the purpose(s) indicated in Section 8a. above must include a "**general public benefit**" as set forth in §31F-3-301(a) of the West Virginia Code. Per §31F-1-102(c), "general public benefit" means "a material positive impact on society and the environment taken as a whole, as measured by a third-party standard, from the business and operations of a benefit corporation."].

☐ **No** [Proceed to Section 9.]

9. Is the business a **Scrap Metal Dealer?**

☐ **Yes** [If "**Yes**," you must complete the **Scrap Metal Dealer Registration Form (**Form SMD-1**)** and proceed to Section 10.]

☐ **No** [Proceed to Section 10.]

10. **Corporate Status Information**:

a. Corporation is organized as (check one): ☐ **For Profit** ☐ **Non-Profit**

b. **Officers and Directors**: (*add additional pages if necessary; please **list all officers***)

Officer Title	Officer Name	No. & Street Address	City	State	Zip Code

11. Is the organization a "**veteran-owned**" organization?

Effective **JULY 1, 2015**, to meet the requirements for a "**veteran-owned**" organization, the entity filing the registration must meet the following criteria per West Virginia Code §59-1-2a:

1. A "**veteran**" must be honorably discharged or under honorable conditions, and
2. A "**veteran-owned business**" means a business that meets one of the following criteria:
   - Is at least fifty-one percent (51%) unconditionally owned by one or more veterans; or
   - In the case of a publicly owned business, at least fifty-one percent (51%) of the stock is unconditionally owned by one or more veterans.

☐ **Yes** (If "**Yes,**" attach **Form DD214**) ☐ **CHECK BOX** indicating you have attached **Veteran Affairs Form DD214**

☐ **No**

You may obtain a copy of your Veterans Affairs Form DD214 by contacting:

National Personnel Records Center
Military Personnel Records
1 Archives Drive
St. Louis, MO 63138
Toll free: 1-86-NARA-NARA or
1-866-272-6272 Phone: 314-801-0800
www.archives.gov/veterans/military-service-records

Per WV Code 59-1-2(j) effective July 1, 2015, the **registration fee is waived** for entities that meet the requirements as a "**veteran-owned**" organization. See attached instructions to determine if the organization qualifies for this waiver. In addition, a "**veteran-owned**" entity will have **four (4) consecutive years of Annual Report fees waived** AFTER the organization's initial formation [see WV Code 59-1-2a(m)].

12. The number of acres of land it holds or expects to hold in West Virginia is: _____

13. **Contact and Signature Information*** (See below ***Important Legal Notice Regarding Signature***):

a. Contact person to reach in case there is a problem with filing: _____ Phone: _____

b. Print or type name of singer: _____ Title/Capacity of signer: _____

c. **Signature:** _____ **Date:** _____

Important Legal Notice Regarding Signature: Per **West Virginia Code** §31D-1-129**. Penalty for signing false document.** Any person who signs a document he or she knows is false in any material respect and knows that the document is to be delivered to the secretary of state for filing is guilty of a misdemeanor and, upon conviction thereof, shall be fined not more than one thousand dollars or confined in the county or regional jail not more than one year, or both.

Important Note: This form is a public document. Please **do NOT provide any personal identifiable information on this form** such as social security number, bank account numbers, credit card numbers, tax identification or driver's license numbers.

INSTRUCTIONS FOR FILING WEST VIRGINIA APPLICATION FOR CERTIFICATE OF AUTHORITY

Check for availability of the corporate name in West Virginia. Preliminary information is available by phone at 304-558-8000. To reserve your name, file an application for name reservation with a $15 fee. If approved, the name will be held for 120 days. If an insurance company, list your NAIC number, if you have one. Insurance companies are subject to and must adhere to the naming provisions of West Virginia Code §33-1-12.

***IMPORTANT *** Obtain a "**Certificate of Good Standing**" or "**Certificate of Existence**" (also known in some states as a "Certificate of Status," or "Certificate of Fact), from your home state of original incorporation **dated during the current tax year**. You may contact the home state of original incorporation's Secretary of State Office to obtain a current copy of the Certificate of Good Standing (Existence).

Pursuant to West Virginia Code §33-3-3 the Secretary of State shall not issue a certificate of incorporation to any insurance company until the West Virginia Insurance Commissioner has examined the charter of the insurance company and approved same in writing. If the application is for a currently licensed insurance company, please submit a copy of the Certificate of Authority issued by the West Virginia Insurance Commissioner for your current tax year. If the application is from an insurance company with a pending license review before the West Virginia Insurance Commissioner, please submit a copy of the written approval of the charter from the Office of the Insurance Commissioner. Submitting a copy of the Certificate of Authority issued by the West Virginia Insurance Commissioner or copy of the written approval of the charter, whichever is applicable, at the time of filing will avoid denial of the application by the Secretary of State.

Complete one original application according to the instructions below. If you would like a "filed date-stamped" copy returned to you, then submit two original applications. Incomplete applications will be returned to you for correction.

Mail or deliver to the Secretary of State the following as a packet:

- **Certificate of Existence/Good Standing**, dated during the current tax year, from the original State of Incorporation (the certificate is normally issued by the home state of formation's Secretary of State,
- Original application(s) for **Certificate of Authority**, signed by an officer of the corporation,
- A letter of resolution of your board of directors adopting a forced DBA Name if your home state name isn't available in West Virginia,
- Insurance companies include a copy of the Certificate of Authority issued by the WV Insurance Commissioner for your current tax year or a copy of the written approval of the charter from the Offices of the West Virginia Insurance Commissioner,
- Scrap Metal Dealers must also include a completed **Scrap Metal Dealer Registration Form (**Form SMD-1**)** [per revised West Virginia Business Code §61-3-49-(b)(4)] and submit with the application.

Completing the Application

Section 1. a. The name entered here must match the name on your good standing certificate.

b. Even if your corporation is not perpetual in your home state, remember that your responsibilities for tax reporting in West Virginia will not end until you file a certificate of withdrawal.

c. If an insurance company, list your NAIC number, if you have one.

☐ **CHECK THE BOX to indicate you have obtained and submitted with this applicatio CERTIFICATE OF EXISTENCE (GOOD STANDING), dated during the current tax year, from your home state of original organization as required to process your application. The certificate may be obtained by contacting the Secretary of State's Office in the home state of original organization.**

Section 2. a. The **principal office address**, whether it is in West Virginia or out-of-state.

b. Enter the **principal mailing address**, if different from principal office address.

Section 3. a. ***PLEASE READ CAREFULLY!*** More applications are rejected due to invalid name selection than any other reason.

Is your name available? The name of a corporation shall not be the same as, and shall be distinguishable from any other name which has been reserved or filed. The "distinguishable" standard is defined as meaning (a) at least a one word difference when the words are common terms and the company is or might appear to be in a similar business; or (b) at least a word order difference between names when the different word is a proper name or an unusual term, or when the company is clearly in a different type of business from the existing company.

- If your home **state name is available, but does not include a corporate suffix such as "Inc." or "Corp."….** enter your corporate name on the second line and add a corporate suffix.
- **If your home state name is not available**…attach a resolution of the board of directors adopting an available fictitious name for use to transact business in West Virginia and enter the name on 3.a. "DBA" (doing business as name).

  Does your name misrepresent the purpose of your corporation? The name of a corporation may not contain any word or phrase which indicates or implies it is organized for any purpose other than one or more of the purposes in its articles of incorporation.
- **Banking and Insurance**: Words implying the business of banking or insurance may only be used if the corporation is authorized under the laws of this state to engage in those businesses.
- **Engineering:** Words such as "engineer" or "engineering" may be used only if the purpose of the corporation is to practice professional engineering and one or more of the officers are registered in West Virginia as a professional engineer.**You must enclose with the Secretary of State's Application for Certificate of Authority, (Form CF-1), a copy of your latest Certificate of Authorization (COA) issued by the following state licensing board upon your most recent COA application or renewal (Without this proof of authorization, your application will be rejected and returned to you.)**:

  West Virginia State Board of Registration for Professional Engineers
  300 Capitol Street
  Charleston, WV 25301
  304-558-3554
  www.wvpebd.org
- **Professional Corporation**: If the home state name includes the abbreviation "**P.C.**" in the corporate name (indicating a "Professional Corporation") the words "Professional Corporation" must be spelled out in full to be eligible to file in State of West Virginia.

b. Enter the **designated (physical) office address in West Virginia**, if any.

c. Enter the **name of the West Virginia county** in which the designated (physical) office is located.

d. Enter the **mailing address of the registered office in West Virginia**, if any.

Section 4. Provide the **name and address of a person or business (agent) to whom a summons or complaint may be mailed**, if any. The agent need not have a West Virginia address. You may change your agent by filing with the Secretary of State an application to appoint or change address, agent or officer [**Form AAO**] (fee$15).

Section 5. List an **e-mail address (***yourname@domainname.com***)** where you can receive important e-mail notifications (e.g., **Annual Report** notices).

Section 6. List the **website address** (*domainname.com*) **of the business**, if any. DO NOT list a physical mailing address.

Section 7. Indicate whether or not you **own or operate more than one business in West Virginia**. If **"Yes"**...

a. List the **total number of businesses in West Virginia** in the space provided.
b. List the **total number of counties in West Virginia** in which the businesses conduct operations.

Section 8. a. It is required you describe the **purpose** [i.e., principal activity to be conducted by the business] of the corporation clearly to ensure you receive all the necessary information about registering with the required state agencies. Attach an additional page if necessary. **Only the following professions listed below under the specified articles of Chapter 30 of West Virginia Code may register as a "professional" business organization.**

Attorneys-at-law	[Article 2]	Physicians & Podiatrists	[Article 3]
Dentists	[Article 4]	Optometrists	[Article 8]
Accountants	[Article 9]	Veterinarians	[Article 10]
Architects Land	[Article 12]	Engineers	[Article 13]
Surveyors	[Article 13a]	Osteopathic Physicians & Surgeons	[Article 14]
Chiropractors	[Article 16]	Psychologists	[Article 21]
Social Workers	[Article 30]	Acupuncturists	[Article 36]

Important **Professional business organizations: CHECK BOX** indicating you have attached **Verification of Eligibility** (Form **VOE**) to this application if your profession meets the requirements as defined by **Chapter 30** of the WV Code. **The Secretary of State cannot complete your filing until verification is received from the appropriate state licensing board. Your application will be rejected if the VOE is not signed by the board and attached.**

b. If "**No**," proceed to Section 8c. If "**Yes**," the above purpose includes any business activity conducted as a **consumer litigation financier,** pursuant to WV Code §46A-6N, the organization must register as a litigation financier by completing and submitting to Secretary of State an original copy of the **Application for Registration as a Litigation Financier** (Form **LF-1**) and pay the associated requisite filing fee. If this applies to your organization, check the "**Yes**" box to include in your purpose the required statement that the organization shall be designated as a litigation financier.

c. If "**No**," proceed to Section 9. If "**Yes**," and the **FOR PROFIT** incorporation elects to be organized for purposes as a "**Benefit Corporation**," per West Virginia Code §31F-3-301 (**NON-PROFIT corporations CANNOT elect this status**), the purpose listed in Section 8a. above must clearly state as one of its purposes the purpose of creating a "**general public benefit**." You must indicate as one of its purposes stated in Section 8a. above the purpose of creating a "**general public benefit**" as set forth in §31F-3-301(a) of the West Virginia Code. A "general public benefit" means "a material positive impact on society and the environment taken as a whole, as measured by a third-party standard, from the business and operations of a benefit corporation," [see West Virginia Code §31F-1-102(c)]. This purpose is in addition to its principal business purpose stated under §31D-3-302 of the West Virginia Code. It may also identify one or more "**specific public benefits**" that it is the purpose of the corporation to create. Per West Virginia Code §31F-1-102(e) "specific public benefit" means "a benefit that serves one or more public welfare, religious, charitable, scientific, literary or educational purposes, or other purposes or benefit beyond the strict interest of the shareholders of the benefit corporation, including:

(1) Providing low-income or under served individuals or communities with beneficial products or services;
(2) Promoting economic opportunity for individuals or communities beyond the creation of jobs in the normal course of business;
(3) Preserving or improving the environment;
(4) Improving human health;
(5) Promoting the arts, sciences or advancement of knowledge;
(6) Increasing the flow of capital to entities with a public benefit purpose; and
(7) Conferring any other particular benefit on society or the environment."

Section 9. If the business activities include "**Scrap Metal Dealer,**" check "**Yes**" and complete the **Scrap Metal Dealer Registration Form (Form SMD-1)** [per revised West Virginia Business Code **§61-3-49-(b)(4)**] and submit with your application. Proceed to Section 10. If "**No**," proceed to Section 10.

Section 10. a. Check whether the corporation is formed **for profit** or **non-profit** purposes.

b. List the **officer titles** (i.e., President, Vice-President, Secretary, Treasurer, Director, etc.), **officer names and addresses** (street number with street name, city, state and zip code) for each of the officers/directors of the corporation. The address information may be either the officer/director's personal address or the corporate business address. Attach additional pages, if necessary.

Section 11. Check the appropriate box indicating whether or not the corporation is **"veteran-owned**." Effective **JULY 1, 2015**, the following criteria must be met in order to qualify as a "veteran-owned" entity: (1) veteran must be "honorably discharged or under honorable conditions;" and (2) a privately-owned entity must be at least fifty-one per cent (51%) unconditionally owned by one or more veterans; or (3) if a publicly-owned entity, at least fifty-one per cent (51%) of the stock must be unconditionally owned by one or more veterans [see WV Code **59-1-2a(12)-(13)(A)(B)**]. **If "Yes," you must provide proof of veteran status by including with this application a copy of your Veteran Affairs Form DD214.**

Section 12. Enter the number of acres the company desires to hold in West Virginia. If your company holds more than 10,000 acres of land, you must submit a fee of 5¢ for each acre over 10,000.

Section 13. a. Listing the name of a contact person is optional; however, listing one may speed up the filing process and avoid a possible rejection of the filing if there appears to be a problem with the filing.

b. Print the name of the person signing and list the title/capacity

c. **AN INDIVIDUAL (OFFICER/DIRECTOR) WITH SIGNATURE AUTHORITY MUST SIGN AND DATE THE FORM. The application will be returned to you as incomplete if received by our office without a signature.**

ANNUAL REPORT NOTICE:

West Virginia Code 59-1-2a. requires every corporation (both *for profit* and *non-profit*) to file an annual report and pay the annual report filing fee between 12:00 AM January 1st and 11:59 PM June 30th of each year following the calendar year in which the business was registered with the Office of the Secretary of State. The $25 annual report fee is waived for Veteran-owned entities for the following four (4) years after initial formation in West Virginia [see West Virginia Code 59-1-2a(m)]. Failure to file may result in revocation of the organization's legal authority to transact business in the state. Notification of the filing requirement will be sent, but the company is responsible for filing the annual report as required by West Virginia Code. You may file the annual report online at https://onestop.wv.gov either by logging in, creating a log in, or filing as a 'guest'.

West Virginia Code §31F-5-501 **requires every "benefit corporation," as described in Section 8b. above, to prepare an annual benefit report (separate and unrelated to the Secretary of State Annual Report referenced above) made available annually to each shareholder of the benefit corporation. See West Virginia Code** §31F-5-501 **for further information regarding the "Annual Benefit Report."**

FILING THE APPLICATION - ONE ORIGINAL REQUIRED - AND PAYING THE FEE

Send an additional original if you want a filed date-stamped copy returned to you at no additional cost. The filing fee will consist of paying a registration fee and excess acreage fee, if applicable.
If requesting a certified copy, an additional fee of $15 per certified copy requested is required.

Registration fee* _____

Excess Acreage fee: +_____

$15 per certified copy: +_____

Total fee: =_____

For **Profit** Corporation - **$100 / Non-Profit** Corporation - **$25**
***Veteran-owned** entity registration **FEE WAIVED - $0**
[Registration fee is waived for "veteran-owned" entity effective July 1, 2015 per WV Code **59-1-2(j)**; **Be sure to attach the veteran proof of status Veteran Affairs Form DD214 when claiming "veteran-owned" status.]**

Expedite Fee is additional if requesting expedite service.
See **Customer Order Request** form for more information.

**** *Make your checks payable to **West Virginia Secretary of State***. ****

TEXT ALERTS: Stay up-to-date regarding filing deadlines and changes to business, charity, notary, private investigation, and security guard laws. To sign up, visit the Secretary of State online at **www.wvsos.gov** and select **Text Alerts**. Next, under the heading, "Choose SMS Subscription," click the down arrow and select "Business and Licensing." Then enter your ten-digit mobile phone number and your cellular carrier. Click *Subscribe*. This will allow you to get important information delivered right to your mobile phone. Please note, standard text messaging rates apply and you may unsubscribe at any time.

CHARITABLE REGISTRATION: If your company receives contributions, donations or grants, registration as a charitable organization may be required. Contact our office for more information or visit our web site at **www.wvsos.gov**.

WITHDRAWAL: A foreign corporation is a legal entity which can only withdraw its Certificate of Authority through formal action - not by submitting a letter or making a phone call to the Secretary of State. To withdraw from its Certificate of Authority, a foreign corporation must file the **Application for Certificate of Withdrawal from Certificate of Authority** (Form **CF-5**) and pay the withdrawal fee. You remain liable for all taxes, assessments, fines, penalties and interest until you receive a Certificate of Withdrawal from the Secretary of State. Contact our office for more information.

West Virginia Secretary of
State Business & Licensing
Division Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov

CUSTOMER ORDER REQUEST

INCLUDE THIS FORM WITH YOUR FILING

Name of Business on Filing: _____

Contact for Filing:
Name: _____
Phone: _____
Email: _____

Order Description: Please Identify the type of filing or request being made.

EXPEDITING SERVICE OPTIONS*

- ☐ Standard (5-10 business days) - No additional cost
- ☐ In-Person Same Day -$25 in addition to filing fee
- ☐ Next Business Day - $25 in addition to filing fee
- ☐ 2 Hour - $250 in addition to filing fee
- ☐ 1 Hour - $500 in addition to filing fee

Expediting Service is NOT AVAILABLE for:

-Dissolutions / Withdrawals of Corporations, Voluntary Associations, or Business Trusts
-Credit Service Organization Registrations
-Trademark Filings
-Sole Proprietor / General Partnership Trade Names

*Fees apply to each business. Time frame Indicates when the filing will be completed and registered in the Secretary of State database.

Return Information:

Method of Return:

- ☐ Hold for Pick Up
- ☐ Email: _____
- ☐ Specialty Carrier (Please provide return envelope & prepaid label)
- ☐ USPS Mail (standard)
  Attention: _____
  Street: _____
  City: _____ State: _____ Zip code: _____

Please Mail Filing to Any Secretary of State Hub Office	
WV One Stop Business Center 13 Kanawha Blvd. W. Suite 201 Charleston, WV 25302	**North Central WV Business Hub** 153 West Main Street Suite G - Third Floor Clarksburg, WV 26301

Secretary of State State Capitol Building Charleston, WV 25305 Phone: (304) 558-6000 Website: sos.wv.gov

Next Business Day, 2-Hour, and 1-Hour Expedite Service Guidelines

NEXT BUSINESS DAY EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your "**24-HOUR EXPEDITE"** request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is $25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

Time Constraints: Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in acceptable fileable form.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional $250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional $500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgment (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.