



Wyoming Secretary of State

State Capitol Building, Room 110
200 West 24th Street
Cheyenne, WY 82002-0020
Ph. 307.777.7311
Fax 307.777.5339
Email: business@state.wy.us

For Office Use Only

**Foreign Nonprofit Corporation
Articles of Continuance**

Pursuant to W.S. 17-19-1710 of the Wyoming Nonprofit Corporation Act, the undersigned hereby submits the following Articles of Continuance:

1. Corporation name:

2. Incorporated under the laws of:

(State or country of incorporation)

3. Date of incorporation:

(Date – mm/dd/yyyy)

4. Period of duration:

(This is referring to the length of time the nonprofit corporation intends to exist and not the length of time it has been in existence. The most common term used is “perpetual.” You may refer to your Articles of Incorporation or contact the Corporations Division in your state of incorporation for your period of duration.)

5. Principal office address:

6. Mailing address of the nonprofit corporation:

7. Name and physical address of its registered agent:

*(The registered agent may be an individual resident in Wyoming, a domestic corporation, or foreign corporation authorized to transact business in Wyoming, having a business office identical with such registered office. **The registered agent must have a physical address in Wyoming.** A Post Office Box or Drop Box is not acceptable. If the registered office includes a suite number, it must be included in the registered office address.)*

8. The purpose or purposes of the nonprofit corporation which it proposes to pursue in the transaction of business in the state of Wyoming:

9. Names and usual business addresses of its current officers and directors are:

<u>Office</u>	<u>Name</u>	<u>Address</u>
President		
Vice President		
Secretary		
Treasurer		
Director		
Director		
Director		

10. This corporation is a *(Check appropriate choice.)*:

- a. Public benefit corporation
- b. Mutual benefit corporation
- c. Religious corporation

11. Does this corporation have members? Yes No

12. The corporation accepts the constitution of the state of Wyoming in compliance with the requirement of Article 10, Section 5 of the Wyoming Constitution.

Date:
(mm/dd/yyyy)

Signature: _____

Print Name:

Title:

Contact Person:

Daytime Phone Number:

State of _____)
County of _____)

I, _____, Notary Public, do hereby certify that on this _____ day of _____, _____, personally appeared before me _____, who, being by me first duly sworn, declared that he/she signed the foregoing document as _____ of the corporation and that the statements therein are true.

In witness whereof, I have hereunto set my hand and seal this _____ day of _____, _____.

(Notarial Seal)

Notary

My commission expires: _____

Checklist

Filing Fee: \$25.00 Make check or money order payable to Wyoming Secretary of State.

In accordance with W.S. 17-19-1710, any nonprofit corporation incorporated for any purpose under the laws of any jurisdiction other than this state, and so long as the corporation complies with W.S. 17-19-301(b), may, if the jurisdiction will acknowledge the corporation's termination of domicile in the foreign jurisdiction, apply to the secretary of state for registration under this act.

The application shall be executed by the corporation by its president or other officer, director, trustee, manager or person performing functions equivalent to those of a president and who is authorized to execute the application on behalf of the corporation and shall be verified by the officer signing on behalf of the corporation.

The Articles must be accompanied by a written consent to appointment executed by the registered agent.

For consistency the Secretary of State's Office will only keep one version of the agent's name on file.

A copy of the Articles of Incorporation and all amendments currently certified (within the last six (6) months) by the proper officer of the state or nation of incorporation.

A document from an official of the foreign jurisdiction indicating that the company will be dissolved after it continues to Wyoming.

A copy of the corporate resolution authorizing continuance of the corporation in Wyoming.

Please submit one **originally signed** document and one exact photocopy of the filing.

Please review form prior to submitting to the Secretary of State to ensure all areas have been completed to avoid a delay in the processing of your documents.



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Consent to Appointment by Registered Agent

I, _____, registered office located at _____
(name of registered agent)

voluntarily consent to serve

* *(registered office physical address, city, state & zip)*

as the registered agent for _____
(name of business entity)

I hereby certify that I am in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

Signature: _____ **Date:** _____
(Shall be executed by the registered agent.) *(mm/dd/yyyy)*

Print Name: _____ Daytime Phone: _____

Title: _____ Email: _____

Registered Agent Mailing Address
 (if different than above):

***If this is a new address, complete the following:**

Previous Registered Office(s):

I hereby certify that:

- After the changes are made, the street address of my registered office and business office will be identical.
- This change affects every entity served by me and I have notified each entity of the registered office change.
- I certify that the above information is correct and I am in compliance with the requirements of W.S. 17-28-101 through W.S. 17-28-111.

Signature: _____ **Date:** _____
(Shall be executed by the registered agent.) *(mm/dd/yyyy)*

Checklist

Submit one **originally signed** consent to appointment and one exact photocopy.