



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

**Profit Corporation
Articles of Continuance**

Pursuant to W.S. 17-16-1810 of the Wyoming Business Corporation Act, the undersigned hereby submits the following Articles of Continuance:

1. Corporation name:

2. Incorporated under the laws of:

(State or country of organization)

3. Date of incorporation:

(Date – mm/dd/yyyy)

4. Period of duration:

(This is referring to the length of time the 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. Mailing address of the corporation:

6. Principal office address:

7. Name and physical address of its registered agent:

*(The registered agent may be an individual resident in Wyoming, a domestic or foreign entity 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. Purpose of the corporation which it proposes to pursue in the transaction of business in this state:

9. Names and respective addresses of its officers and directors:

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

10. Aggregate number of shares or other ownership units which it has the authority to issue, itemized by classes, par value of shares, shares without par value and series, if any, within a class:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share</u>
-------------------------	--------------	---------------	----------------------------

11. Aggregate number of issued shares or other ownership units itemized by classes, par value of shares, shares without par value and series, if any, within a class:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share</u>
-------------------------	--------------	---------------	----------------------------

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.

Signature: _____

Date:
(mm/dd/yyyy)

Print Name:

Title: _____ Contact Person:

Daytime Phone Number:

Email:

State of _____
County of _____

Subscribed and sworn to before me this _____ day of _____, _____.

by _____.

SEAL

Notary Public

My commission expires: _____



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

Checklist

Filing Fee: \$100.00 Make check or money order payable to Wyoming Secretary of State.

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

The Articles of Continuance 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 unfiled Articles of Dissolution you will submit to your foreign jurisdiction after the continuance has been processed in Wyoming.

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

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

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.

Note: Once the dissolution has been filed in the former domestic state, an official of the foreign jurisdiction must provide evidence the entity was dissolved after it continued to Wyoming.

Other Requirements:

- An annual report will be due annually on the first day of the anniversary month of formation. If not paid within sixty (60) days from the due date, the entity will be subject to dissolution/revocation.



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

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.