



This Box For Office Use Only

Statement of Correction

See attached detailed instruction

- Filing Fee \$30
- Filing Fee with Expedited Service \$80.00

UBI Number:

Statement of Correction

Pursuant to RCW 23.95.220, the undersigned entity hereby submits a Statement of Correction for the purpose of correcting a record filed in the Corporations & Charities Division of the Office of the Secretary of State.

SECTION 1 (required)

NAME OF ENTITY: (as currently recorded with the Office of the Secretary of State)

SECTION 2 (required)

The record to be corrected is: _____

SECTION 3 (required)

The record was filed on: _____

SECTION 4 (required)

Specify the inaccuracy or defect (see instructions):

SECTION 5 (required)

The corrected inaccuracy or defect of the record is as follows:

SECTION 6 (required)

This record is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.

X _____
Signature Printed Name and Title Date Phone

INSTRUCTIONS – Articles of Correction

Please complete all sections of the application. **USE DARK INK ONLY.** For an electronic, fillable version of this form, please visit our website at www.sos.wa.gov/corps.

UBI Number: (required)

Enter your existing Unified Business Identifier (UBI Number) as currently recorded with the Office of the Secretary of State, in the box in the upper right hand corner of page 1.

Section 1: (required)

Indicate the entity name as currently recorded with the Office of the Secretary of State

Section 2: (required)

Indicate what record is being corrected. (Example: Articles of Incorporation, Articles of Amendment, etc.)

Section 3: (required)

Please provide the date the record listed in Section 2 was filed with the Office of the Secretary of State.

Section 4: (required)

Specify the inaccuracy or defect and the reason for it. (Example: "Article 3 incorrectly lists the number of shares as 600; typing error.")

Section 5: (required)

Provide the corrected inaccuracy or defect of the record in the space provided.

Section 6: (required)

Signature required. Please provide the signature, name, title, date signed and phone number of the individual authorized to sign the Statement of Correction.

FEES: Filing fee is \$30 for the Statement of Correction. If expedited service is requested, include an additional \$50.00 and write "EXPEDITE" on the outside of the envelope. Make checks or money orders payable to "Secretary of State".

All payments must be in US Dollars or drawn on a US Bank. All fees are non-refundable.

Mail completed forms and payment to:

Secretary of State
Corporations Division
801 Capitol Way S
PO Box 40234
Olympia WA 98504-0234

If you have questions, need assistance, or would like to provide feedback please visit the Corporations Division website at www.sos.wa.gov/corps, email your question to corps@sos.wa.gov or call 360-725-0377.