



AMENDED APPLICATION FOR  
 CERTIFICATE OF AUTHORITY  
 RCW 23B.15.040

(Copies of RCW law may be obtained at local and state libraries.)

CHECK LIST

All documents must be typewritten or printed legibly in ink.

1. Name of corporation as authorized to conduct affairs in Washington.
2. Name the corporation currently uses in the state of Washington if different from the name listed on line 1. (If name is not different, insert "N/A".)
3. State or foreign country of incorporation
4. Date Certificate of Authority was issued in Washington
5. Check box why amended application being filed:
- a. Name of the corporation, as recorded in the jurisdiction of incorporation, has been changed. (In this instance a copy of the documents effecting the change, showing the "Filed" stamp of the jurisdiction of incorporation, must be submitted with the amended application.)
- b. Period of duration, as recorded in the jurisdiction of incorporation, has been changed. (In this instance a copy of the documents effecting the change, showing the "Filed" stamp of the jurisdiction of incorporation, must be submitted with the amended application.)
- c. Assumed name the corporation uses in Washington is being changed or deleted. (If new name, a resolution by Corporation's Board of Directors, certified by corporation's secretary, agreeing to use of name in Washington must be submitted with application.)
6. Attached is a copy of the document filed in the state or country of Incorporation showing that jurisdiction's "Filed" stamp.
7. Signature of Officer of corporation or the chairperson of the Board of Directors must be on application.

PAYMENT REQUIREMENTS

- The filing fee for this application is \$30.00. (Make check payable to Secretary of State.)

EXPEDITED SERVICE

The filing fee plus \$20.00 must be included for expedited service.

For immediate assistance the Corporations Division offers expedited walk in filing.

This is available through the mail by marking EXPEDITE in on the outside of the envelope. Include a cover letter stating a day-time telephone number and contact person. Requests will be processed and mailed within 24 hours of receipt.

The original and one (1) or more copies of the this application must be delivered or mailed to:

CORPORATION DIVISION  
 James M. Dolliver Building  
 801 Capitol Way South  
 PO Box 40234  
 Olympia, WA 98504-0234  
 360/753-7115



**AMENDED APPLICATION  
FOR CERTIFICATE OF AUTHORITY  
RCW 23B.15.040**

UBI #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Pursuant to the provisions of RCW 23B.15.040 of the Washington Business Corporation Act, the undersigned does hereby submit an Amended Certificate of Authority.

1. The name of the corporation, on the records of the Office of the Secretary of State of Washington is: \_\_\_\_\_
2. The name the corporation currently uses in the State of Washington, if different from its real name listed above, is: \_\_\_\_\_
3. The state or foreign country of incorporation is: \_\_\_\_\_
4. The date the corporation was authorized to transact business in the State of Washington was: \_\_\_\_\_
5. Application is being filed for the following reason (*Check all applicable items*)
  - The corporation has changed its corporate name to: \_\_\_\_\_
  - Name the corporation will hereafter use In the State of Washington is changed to: \_\_\_\_\_

(NOTE: If the corporation is required to use a fictitious name in order to transact business in the State of Washington a copy of the resolution of the board of directors, certified by the corporation's secretary, adopting the fictitious name is attached.)

6. Attached is a copy of the document filed in the state or country of Incorporation showing that jurisdiction's "Filed" stamp.
7. This document is hereby executed under penalties of perjury, and is, to the best of my knowledge true and correct.

Dated: \_\_\_\_\_, 20\_\_\_\_.

**X** \_\_\_\_\_

(Signature of Officer)