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## Filing Form Cover Letter

Please return the approval certificate to:

Name *(Individual or Business Name)*:

To the Attention of *(if necessary)*:

Address:

City:

State

ZIP Code:

Phone Number:

E-mail Address:

- Check here if you would like to receive important notices via e-mail from the Ohio Secretary of State's office regarding Business Services.
- Check here if you would like to be signed up for our Filing Notification System for the business entity being created or updated by filing this form. This is a free service provided to notify you via e-mail when any document is filed on your business record.

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Please make checks or money orders payable to: "Ohio Secretary of State"

Type of Service Being Requested: (PLEASE CHECK **ONE** BOX BELOW)

- Regular Service:** Only the filing fee listed on page one of the form is required and the filing will be processed in approximately 3-7 business days. The processing time may vary based on the volume of filings received by our office.
- Expedite Service 1:** By including an Expedite fee of \$100.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 2 business days after it is received by our office.
- Expedite Service 2:** By including an Expedite fee of \$200.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 1 business day after it is received by our office. **This service is only available to walk-in customers who hand deliver the document to the Client Service Center.**
- Expedite Service 3:** By including an Expedite fee of \$300.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 4 hours after it is received by our office, if received by 1:00 p.m. **This service is only available to walk-in customers who hand deliver the document to the Client Service Center.**
- Preclearance Filing:** A filing form, to be submitted at a later date for processing, may be submitted to be examined for the purpose of advising as to the acceptability of the proposed filing for a fee of \$50.00. The Preclearance will be complete within 1-2 business days.



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## Credit Card Authorization Form

Form Must Be Printed Or Typed

Cardholder Name

### Address

Street

City

State

ZIP Code

### Credit Card Information

Credit Card Type

Card Number

Expiration Month (MM)

Expiration Year (YYYY)

CVV/Security Code

**JON HUSTED**  
Ohio Secretary of State



Toll Free: (877) SOS-FILE (877-767-3453)  
Central Ohio: (614) 466-3910  
[www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov)  
[busserv@OhioSecretaryofState.gov](mailto:busserv@OhioSecretaryofState.gov)  
File online or for more information: [www.OHBusinessCentral.com](http://www.OHBusinessCentral.com)

**Mail this form to one of the following:**

Regular Filing (non expedite)  
P.O. Box 1329  
Columbus, OH 43216  
  
Expedite Filing (Two business day processing time.  
Requires an additional \$100.00)  
P.O. Box 1390  
Columbus, OH 43216

[For screen readers, follow instructions located at this path.](#)

# Certificate of Conversion for Entities Converting Into the Records of the Ohio Secretary of State

**Filing Fee: \$99**  
**Form Must Be Typed**

Name of Converting Entity

Jurisdiction of Formation

The converting entity:  
**(Check Only (1) One Box)**

Partnership  Foreign Nonprofit Limited Liability Company  
 Foreign Limited Partnership  Foreign For-Profit Limited Liability Company  
 Common Law Trust  Foreign Limited Liability Partnership  
 Foreign Corporation  Other

The converting entity hereby states it has complied with all laws of its jurisdiction of formation.  
Furthermore, the law permits for the conversion.

Name of the Converted Entity

Existing under the laws of

The converted business entity type is  
**(Check One)**

Business Trust  Partnership  
 Domestic Corporation (For-Profit)  Domestic Limited Partnership  
 Domestic Nonprofit Limited Liability Company  Domestic Limited Liability Partnership  
 Domestic For-Profit Limited Liability Company

**Effective Date (Optional)**

This conversion is effective on (If a date is specified, the date must be a date on or after the date of the filing. If no date is specified, the date of filing will be the effective date of the conversion).

The name and address of the person or entity that will provide a copy of the declaration of conversion upon written request

Print Name

Mailing Address

City

State

Zip Code

If the conversion creates a new domestic corporation, limited liability company, partnership, limited partnership, or a limited liability partnership, complete and attach the formation documents prescribed by the secretary of state for the **specific entity type** being created.

**By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.**

**Required**

Must be signed by an authorized representative.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

# Instructions for Certificate of Conversion for Entities Converting INTO the Records of the Secretary of State

This form should be used to file a certificate of conversion to document that an entity converted into the records of the Ohio Secretary of State.

## Converting Entity Information

Pursuant to Ohio Revised Code §§1701.811, §1705.381, §1776.72 and §1782.4310, the certificate of conversion must set forth the name of the converting entity, its jurisdiction of formation and the form of the converting entity (for example, corporation, limited liability company, etc). Also the authorized representative signing the certificate is agreeing to the statement that the converting entity has complied with all of the laws under which it exists and that the laws permit the conversion.

## Converted Entity Information

You must state the name of the converted (resulting) entity, the jurisdiction under the laws of which the converted entity exists, and the form of the converted entity.

## Effective Date

An effective date may be provided but is not required. The conversion is effective upon filing of the certificate of conversion or on a later date specified in the certificate. Please note, if the date provided precedes the date of filing, the effective date will be the date of filing.

## Name and Mailing Address

Provide the name and mailing address of a person or entity that is to provide a copy of the declaration of conversion in response to any written request made by a shareholder, partner, or member of the converting entity.

## Additional Requirements

Pursuant to Ohio Revised Code §§1701.811, §1705.381, §1776.72 and §1782.4310, in the case of a conversion into a new domestic corporation, limited liability company, limited partnership, or other partnership, any formation documents that would be filed upon the creation of the converted entity shall be filed with the certificate of conversion. For example, if a new corporation is created through the conversion, Articles of Incorporation must be filed with the Certificate of Conversion. There is no additional fee to file the formation documents.

## Additional Provisions

If the information you wish to provide for the record does not fit on the form, please attach additional provisions on a single-sided, 8 1/2 x 11 sheet(s) of paper.

## Signature(s)

After completing all information on the filing form, please make sure that the form is signed by at least one authorized representative on behalf of the converting entity. The authorized representative is signing a statement that the declaration of conversion is authorized on behalf of the converting entity and that each person signing the certificate on behalf of the converting entity is authorized to do so. Please include the title of each authorized representative beneath the signature line.

**\*\* Note: Our office cannot file or record a document that contains a social security number or tax identification number. Please do not enter a social security number or tax identification number, in any format, on this form.**