



**ARTICLES OF CONVERSION
DOMESTIC ENTITIES**

State Form 56356 (R4 / 6-19)

**SECRETARY OF STATE
BUSINESS SERVICES DIVISION**
302 West Washington Street, Room E018
Indianapolis, IN 46204
Telephone: (317) 232-6576
www.sos.in.gov

- INSTRUCTIONS:**
1. Use 8½" x 11" white paper for attachments.
 2. Please **TYPE** or **PRINT** in **INK**.
 3. Please visit our office on the web at www.sos.IN.gov
 4. Make check or money order payable to the Secretary of State.
 5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

NOTE: *This form is to be used when the entity that wishes to engage in a conversion is a domestic entity prior to the filing of the Articles of Conversion. This form may be used by the domestic entity to become either a domestic entity of a different type or a foreign entity of a different type.*

PLEASE NOTE: *IF A DOMESTIC ENTITY IS FILING THESE ARTICLES OF CONVERSION TO BECOME A FOREIGN ENTITY OF A DIFFERENT TYPE, THE DOMESTIC ENTITY'S BUSINESS RECORD WILL BECOME INACTIVE AND THE NEW NAME OF THE FOREIGN ENTITY WILL NOT BE REFLECTED IN THE BUSINESS RECORD. IF THE NEW FOREIGN ENTITY WILL CONTINUE TO DO BUSINESS IN INDIANA, IT WILL NEED TO FILE A FOREIGN REGISTRATION STATEMENT.*

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business
E-mail address of business (SOS use only)

RETURN DOCUMENTS TO:

Name		
Street address, line 1		
Street address, line 2		
City	State	ZIP code
Telephone number ()	E-mail address (If different from above – SOS use only)	





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State Form 56356 (R4 / 6-19)

Indiana Code 23-0.5-9-49
23-0.6-4-5

FILING FEE: \$30.00

The undersigned, desiring to convert and entity's type of entity pursuant to the provisions of Indiana Code 23-0.6-4, executes the following Articles of Conversion.

ARTICLE I – NAME AND JURISDICTION OF ENTITY

SECTION 1: Name of the entity (*The name must meet the requirements of Indiana Code 23-0.5-3-1.*)

a. The name of the entity immediately before filing these Articles of Conversion

b. The name of the entity immediately after filing these Articles of Conversion

SECTION 2: Entity type (*Example: corporation, limited liability company, etc.*)

a. The entity type of the entity immediately before filing these Articles of Conversion

b. The entity type of the entity immediately after filing these Articles of Conversion

SECTION 3: Jurisdiction

a. The jurisdiction of formation of the entity immediately before filing these Articles of Conversion

Indiana

b. The jurisdiction of formation of the entity immediately after filing these Articles of Conversion

ARTICLE II – EFFECTIVE DATE

Effective date of the Articles of Conversion (*month, day, year*) (*The effective date may not be more than ninety (90) days after the date the Articles of Conversion were filed.*)

ARTICLE III – PUBLIC ORGANIC RECORD

Please complete either a. or b. below.

a. If, after the conversion becomes effective, the entity will become a domestic entity, please attach the entity's public organic record (defined in IC 23-0.5-1.5-33) as required by Indiana Code 23-0.6-4-5(b)(5) and designate it "Exhibit A." The public organic record should be the initial filing form (For example: Articles of Incorporation) for the domestic entity that will exist after these Articles of Conversion are filed.

b. If, after the conversion becomes effective, the entity will become a foreign entity, please provide an address and e-mail address to which the Secretary of State may send any process served on the Secretary of State under Indiana Code 23-0.5-4-6(e).

Number and street	City	State	ZIP code
E-mail address			

ARTICLE IV – REGISTERED AGENT INFORMATION

To determine if your Registered Agent is a Commercial Registered Agent (CRA), go to INBIZ.in.gov.

Provide either commercial registered agent or noncommercial registered agent information below.

<input type="checkbox"/> Commercial registered agent	Name of registered agent (<i>Do not provide address.</i>)
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OR

<input type="checkbox"/> Noncommercial registered agent	Name of registered agent
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Address (<i>number and street</i>) (<i>A P.O. Box is not acceptable unless accompanied by a Rural Route number.</i>)	City	State IN	ZIP code
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(OPTIONAL) E-mail address of the registered agent at which the registered agent will accept electronic service of process

By checking the box, the Signator(s) represent(s) that the Registered Agent named in these Articles of Conversion has consented to the appointment of Registered Agent.

ARTICLE V – APPROVAL

This conversion was approved in accordance Indiana Code 23-0.6.

In Witness Whereof, the undersigned duly authorized representative of the entity executes these Articles of Conversion and verifies, subject to penalties of perjury, that the statements contained herein are true, this ____ day of _____, 20____.

Signature

Printed name

Title