



RESTATED CERTIFICATE OF INCORPORATION (Oklahoma Not for Profit Corporation)

TO: OKLAHOMA SECRETARY OF STATE
421 NW 13th St, Suite #210
Oklahoma City, OK 73103
(405) 522-2520

Filing Fee: \$25.00

I hereby execute the following articles for the purpose of **restating** the certificate of incorporation in its entirety for:

_____ ,
an Oklahoma not for profit corporation, pursuant to the provisions of Title 18, Section 1080:

❖ The corporation is a Benefit Corporation (Title 18, Section 1202): (check one) Yes No

1. Name of the corporation: _____

(Note: The name of the corporation **shall** contain one of the words **association, company, corporation, club, foundation, fund, incorporated, institute, society, union, syndicate, limited** or any abbreviations thereof, with or without punctuation, which shall be such as to distinguish it upon the records in the Office of the Secretary of State.)

2. Date of filing of its original certificate of incorporation: _____

3. **NAME** and street address of the registered agent for service of process in the state of Oklahoma:

❖ The registered agent **shall** be the corporation itself, an individual resident of Oklahoma, **or** a domestic or qualified foreign corporation, limited liability company, or limited partnership.

Oklahoma

Name	Street Address	City	State	Zip Code	County
(P.O. BOXES ARE NOT ACCEPTABLE)					

4. In the event the corporation is a **CHURCH**, the street address of its location in Oklahoma:

Street Address	City	State	Zip Code
(P.O. BOXES ARE NOT ACCEPTABLE)			

5. Duration of the corporation is **perpetual**, unless otherwise stated: _____

6. Nature of the business or purposes for which the corporation is being formed:

❖ It shall be sufficient to state, either alone or with other businesses or purposes, that the purpose of the corporation is to **engage in any lawful act or activity for which corporations may be organized under the general corporation law of Oklahoma.**

**Oklahoma Secretary of State
Request to receive
documents electronically**

No need to wait on your filed documents to be mailed back to you. If you would like your filed documents returned electronically, please complete and attach this form to your documents. Complete ALL information below to receive an email which will contain a link to retrieve your filed documents. (Please print or type clearly.)

Return filed documents electronically

Receipt will read as follows:

PERSONAL or BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP CODE: _____

PHONE OR CELL: _____

EMAIL ADDRESS: _____

(It is critical that the email address is correct, or you may not receive the notification of filing)

7. **E-MAIL** address of the primary contact for the registered business:

8. This corporation does not have authority to issue capital stock.

9. This corporation is not for profit, and as such the corporation does not afford pecuniary gain, incidentally or otherwise, to its members.

CHECK ONE OF THE FOLLOWING STATEMENTS, WHICHEVER IS APPLICABLE:

Such restated certificate of incorporation was duly adopted in accordance with the provisions of Title 18, Section 1080 after being proposed by the governing body of the corporation and approved by the members of the corporation in the manner and by the vote prescribed in Title 18, Section 1077, and **restates, integrates** and **further amends** the certificate of incorporation.

OR

Such restated certificate of incorporation was duly adopted in accordance with the provisions of Title 18, Section 1080 by the governing body without a vote of the members of the corporation in accordance with Title 18, Section 1077, and merely **restates** and **integrates** and **does not further amend** the certificate of incorporation as up to this time amended or supplemented, and that there is no discrepancy between those provisions and the provisions of this restated certificate.

The restated certificate of incorporation must be signed by the president or vice president of said corporation and attested to by its secretary or assistant secretary.

- Signed this _____ day of _____, _____ by:

Signature of **President** or **Vice President**

Printed Name

Attested to by:

Signature of **Secretary** or **Assistant Secretary**

Printed Name