



**FORM 21A**  
Mandatory

**AMENDED CERTIFICATE OF AUTHORITY  
FOREIGN BUSINESS CORPORATION**

Sec. [180.1504](#) Wis. Stats.

<b>Currently registered in Wisconsin as:</b>	
Name of the Corporation (prior to any change effected by this amendment)	State or Country of Incorporation (prior to any change)

**AMENDED CERTIFICATE OF AUTHORITY**

**1. Name of foreign corporation:**

**2. If the name is not distinguishable from a name that another entity has already reserved or registered with the Department, enter a fictitious name adopted pursuant to s. [180.1506\(1\)](#), Wis. Stats.:  
*Note – if entering a new fictitious name, complete form 21B and submit it with this application.***

**3. Incorporated under the laws of (*provide the state (other than Wisconsin) or the foreign country of the corporation’s governing law*):**

<b>4. Date of incorporation (MM/DD/YYYY)</b>	<b>5. Does the corporation have perpetual existence?</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> , organized for a duration of _____ years
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**6. Name of the corporation’s registered agent in Wisconsin**

**7. Email address of the registered agent**

**8. Street address of the registered office in Wisconsin**

City	State <b>WI</b>	Zip/Postal code
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9. Street address of the principal office (may be located outside Wisconsin)			
City	State/Province	Country	Zip/Postal code

**10. Officers**

Complete the applicable portions of the table below, or attach a schedule labeled “Item 10” with the names, titles, and usual business or home addresses of each of the corporation’s principal officers.

<u>Title</u>	<u>Name</u>	<u>Address</u> (either usual business address or home address)
CEO		
Pres.		
VP		
Secy.		
Treas.		

**11. Directors**

Complete the applicable portions of the table below, or attach a schedule labeled “Item 11” with the names, board positions, and usual business or home addresses of each of the corporation’s directors. If the corporation has no directors, enter “None.”

<u>Title</u>	<u>Name</u>	<u>Address</u> (either usual business or home address)
Chair		
Dir.		
Dir.		
Dir.		
Dir.		

**12.** Indicate the number of shares the corporation is **authorized to issue** and the number of shares it has **actually issued**, itemized by class and series (if any), and enter the par value (if any) of the shares in each class or series. If any class or series of shares does not have a par value, enter “NPV” for “no par value.”

*If necessary, attach separate pages labeled “item 12” that include the required information.*

Class	Series	Number of Shares		Indicate par value (\$) per share, or “NPV” for no par value
		AUTHORIZED to issue	ISSUED	

**13. EXECUTION**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Officer Title

(Optional) This document has a **delayed** effective date/time of: \_\_\_\_\_  
(up to 90 days after received date)

**Contact Information:**

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Name

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Mailing Address

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City	State	Zip Code
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Email Address	Phone Number
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**INSTRUCTIONS** (Refer to section [180.1504](#), Wis. Stats. for document content)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a check for the \$40.00 filing fee, payable to the Department of Financial Institutions. (If sent by express or priority U.S. mail, please mail to State of WI-Dept. of Financial Institutions, Division of Corporate and Consumer Services, 4822 Madison Yards Way, 4th Fl., North Tower, Madison WI, 53705.) If requesting optional expedited service, please check the expedited service box in the upper-right corner of the first page and include an additional \$100.00. Filing fees are non-refundable. This document can be made available in alternate formats upon request to qualifying individuals with disabilities. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577 (hearing-impaired may call 711 for TTY) or by email at [DFICorporations@dfi.wisconsin.gov](mailto:DFICorporations@dfi.wisconsin.gov).

**NOTE: In most circumstances, this document must be accompanied by a current CERTIFICATE OF STATUS** (sometimes called “certificate of existence” or “certificate of good standing”) issued by the Secretary of State (or other official having custody of corporate records) in the state or country under whose laws the corporation is incorporated, attesting to the existence and status of the corporation. The certificate must be issued not more than 60 days prior to the date the document is received in this office, in condition for filing. **A certified copy of the charter documents is not an acceptable substitute.**

A certificate of status is not required if the only change effected by the amendment is to change the corporation’s fictitious name. In all other circumstances, the certificate of status must be included with the completed form.

**“Currently registered as . . .”** In the boxes that appear immediately under the heading “Currently registered as,” provide the corporation’s name and its state or foreign country of incorporation as they appeared in the records of the Department prior to any changes made in the amended certificate.

**Amended certificate of authority.** In the numbered items appearing below the heading “Amended Certificate of Authority,” provide the required information as of the current date (i.e., after any changes effected by the amendments).

**Item 1.** Enter the name of the foreign corporation, as it appears after any amendments.

**Item 2.** The name under which the corporation is registered in this state must be distinguishable on the records of the Department from other entities that are registered with the Department and from any name that has been reserved or registered with the Department. You can preliminarily check the availability of an entity name using the Department’s corporate records database, which is publicly available through the Department’s website.

If the name of the corporation is not distinguishable on the records of the department as provided in s. [180.1506\(2\)](#), Wis. Stats., enter the fictitious name under which the entity will do business in this state. If the fictitious name is new, the corporation must complete the separate form 21B. The name must contain the word “corporation,” “incorporated,” “company,” or “limited” or the abbreviation “corp.,” “inc.,” “co.,” or ltd.,” or a variation of these words or abbreviations of like import in another language, or that differs only with respect to capitalization of letters or punctuation.

**Items 3 & 4.** Enter the name of the jurisdiction (either a state other than Wisconsin or a foreign country) under whose laws the foreign corporation is incorporated, as well as the date of its incorporation.

**Item 5.** Indicate whether the corporation has perpetual existence or a defined period of duration. If it has a defined period of duration, state its period of duration.

**Items 6 & 7.** Enter the name of the corporation’s registered agent in this state and the email address of that agent. Annual report forms, notices and other official communications are directed to the entity’s registered agent, so it is important to keep this information current.

**Item 8.** The entity must have a registered agent located at a registered office in Wisconsin. The registered office address must be identical to the registered agent’s business office and must be an actual physical location with a street address, and not solely a P.O. Box, mailbox service, or telephone answering service. Provide the street number and name, city and ZIP code in Wisconsin.

**Item 9.** Enter the street address of the entity’s principal office. The entity’s principal office may be located outside Wisconsin.

**Items 10 & 11.** Provide the name, title, and address (either the usual business address or home address) of each of the corporation’s officers and directors.

**Item 12.** Specify the number of shares the corporation is authorized to issue, itemized by class (and series within a class) if applicable. For each type of shares the corporation is authorized to issue, specify the number of share the corporation has actually issued and the par value of each share. If the shares are without par value, indicate by denoting “NPV” (no par value).

**Item 13.** This document must be executed by an officer of the corporation, subject to two limited exceptions: (1) if directors have not been selected, it may be signed by an incorporator identified in the initial articles of incorporation; and (2) if the corporation is in the hands of a receiver, trustee or other court-appointed fiduciary, it may be signed by the fiduciary. Corporate directors are not authorized to sign this document in their capacities as directors. (A corporate director who also serves as an officer may sign the document, but that person must sign in their capacity as an officer of the corporation.)

**Optional delayed effective date/time.** This document may declare a delayed effective date and time. The effective date/time may not be before, or more than 90 days after, the document is received by the Department of Financial Institutions for filing. If no effective date/time is specified, the document will take effect at the close of business on the date it is received for filing by the Department.