

**READ CAREFULLY BEFORE SUBMITTING** - Expedite service is **NOT AVAILABLE** for the following filings:

West Virginia Secretary of State

Business & Licensing Division Tel: (304)558-8000 Fax: (304)558-8381

Website: www.wvsos.gov

Rev. 01/2023

# **Customer Order Request**

#### SUBMIT THIS COMPLETED FORM WITH YOUR FILING.

Attach signed pre-paid slip.

	filings including Sole Proprietorsh thdrawal of Corporation, Volunta				
Order Processing Requested	l*: * * * Expedite Proc	essing Requires Additional	Fees * * *		
Standard Processing**	24-HOUR Expedite***	2-HOUR Expedite	1-HOUR Expedite		
Avg. Processing Time: 5-10 business days	(additional \$25.00 fee included)	(additional \$250.00 fee included)	(additional \$500.00 fee included)		
Email to: CorpFilings@wvsos.gov	Email to: eFilings@wvsos.gov				
ALL	Requests for Copies of document	s email to: Copies@wvsos.gov			
*"Processing" indicates the filing will be con  **Standard Processing applications receive  ***NOTE: Orders filed in person through  Expedite fee of \$25.00 per order.	ed by E-MAIL or FAX must include the e-F	Payment Authorization form with credit			
Name of Entity:					
Return filing to: Return Address)					
Contact Name:	Phone:				
Return Delivery Options: Ema	•	a copy via mail; must be ordered FedEx: Acct #	d separately.		
Hold for Pick Up Mai	il to Return Address above				
Other (explain below):		UPS: Acct#			
Order Description (include items bei	ng ordered and fee breakdown):				
PLEASE NOTE: Original paperwork is ou want a file stamped copy returned to y dditional \$15 per certified copy being it	you at no extra charge. Certified copy re		nt:		
Payment Method:					
Check/Money Order	Credit Card (Must attach e-Pay	yment Authorization request form	including payment information.)		

**Pre-paid Acct #:** 

Cash (<u>Do Not</u> mail cash)



MAC WARNER
Secretary of State
State Capitol Building
Charleston, WV 25305
Phone: (304) 558-6000
Website: www.sos.wv.gov

# 24-hour, 2-hour and 1-hour **Expedite Service Guidelines**

IMPORTANT: To ensure expedited service, please mark "EXPEDITE" in a conspicuous place at the top of the service request. Please indicate method of delivery.

#### 24-HOUR EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your "24-HOUR EXPEDITE" request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is \$25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

**Time Constraints:** Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in acceptable fileable form.

#### 2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

#### 1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

**1-Hour and 2-Hour Time Constraints:** Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgement (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.



## West Virginia Secretary of State

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Website: www.wvsos.gov

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### e-Payment Authorization

USE BLACK INK ONLY - DO NOT HIGHLIGHT

e-r ayment Authorization	has been processed by	y this office. Electronic storage	nation and will be properly shredded after payment of payment information is only permitted by signed ime by written request by the authorized party.
Service Type: Fax E-mail	Mail		
Payment by Card (card holder name and	d billing address requi	ired below)	
Card Type: Visa	Mastercard	Discover	American Express
Credit Card Number:			<u>V Code</u> *
* 3-digit number on back of VISA, Ma 4-digit number on front right side of		ards.	
<b>NOTICE:</b> For security and verification purp located on the credit card. Failure to include	-		, ,
Credit Card Expiration Date: Month:		Year:	
		Amount to Char	ge Card: USD \$
Order Information (required)			
Entity Name:			
Card Holder Information:			
Name as it appears on the account			
Billing Address			
City		State	Zip Code
-			Zip code
Telephone		Ext.	
<b>Payment Information Storage Author</b> I authorize the Secretary of State to store this			tions processed by Secretary of State:
X		Date	
Authorized Signature			
Payment Authorization (required)			
I authorize the Secretary of State to bill an am	nount not to exceed the	e following to be charged to	the above listed account(s):
X		Date	
Authorized Signature			

**Not to Exceed Amount: USD \$**