



Please check box for (Optional)
Expedited service

☐ + \$25.00

FORM **53**

STATEMENT OF CORRECTION

Section [178.0116](#), [179.0209](#), [180.0124](#), [181.0211](#), or [183.0209](#) Wis. Stats.

1. Name of the entity:

Enter the name of the entity filing this document as it currently appears in the Department's records, prior to any correction being made in this document.

2. Name and prior filing date of the document that is being corrected:

Enter the name of the filed document that is being corrected and the date it was previously filed with the Department.

Document name: _____

Filing date of record: _____

3. Grounds for correction. The above-named document was:

☐ inaccurate when it was filed (*complete items 4, 5, & 7 below*)

☐ defectively signed (*complete items 4, 6, & 7 below*)

☐ defectively transmitted to the Department by electronic means (*complete items 4, 5 & 7 below*)



(X) Check all that apply

Note: *statements of correction may only be used to correct inaccuracies or defects in a document that existed at the time the document was filed. If the document was accurate when filed but information in it has subsequently changed, the entity can provide the updated information by amending the original filing.*

4. Description of the defect(s). In the space below, specify any inaccuracies or defects in the filed document that the entity seeks to correct in this filing. Attach additional pages if needed.

5. [IF APPLICABLE] Corrected statement(s). In the space below, provide the corrected text for any inaccurate or defective statements described in item 4 above. Attach additional pages if needed.

6. [IF APPLICABLE] Corrected execution.

Executed on _____
(Date)

(Signature)

Select and mark (X) below the appropriate title of the person executing the document.

(Printed name)

For a Corporation

Title: ☐ Incorporator **OR**

☐ President ☐ Secretary

☐ Other: _____

For a Limited Liability Company

Title: ☐ Organizer **OR** ☐ Other: _____

For a Limited Liability Partnership

Title: ☐ Partner **OR** ☐ Other: _____

For a Limited Partnership

Title: ☐ General Partner

7. Executed on _____
(Date)

(Signature)

Select and mark (X) below the appropriate title of the person executing the document.

(Printed name)

For a Corporation

Title: ☐ President ☐ Secretary

☐ Other: _____

For a Limited Liability Company

Title: _____

For a Limited Liability Partnership

Title: ☐ Partner or ☐ Other: _____

For a Limited Partnership

Title: ☐ General Partner

Contact Information:

| | | |
|-----------------|--------------|----------|
| Name | | |
| Mailing Address | | |
| City | State | Zip Code |
| Email Address | Phone Number | |

INSTRUCTIONS (Refer to section [178.0116](#), [179.0209](#), [180.0124](#), [181.0211](#), or [183.0209](#), Wis. Stats., as applicable, 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 filing fee specified on page 4 below, 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 \$25.00. 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.

Item 1. Enter the name of the entity that previously filed the record that is being corrected. Enter the entity's full name as it presently appears on the Department's records, prior to any corrections made in this document. If the entity has registered with the Department under a fictitious name, provide the fictitious name as well as the entity's true name.

Item 2. Specify the record to be corrected (e.g., articles of incorporation, annual report, articles of amendment, etc.) and the date it was filed by the Department. You can find the filing date by reviewing the entity's online filing history, which is publicly accessible through the Department's corporate records database on its website.

Item 3. Wisconsin law authorizes statements of correction under three sets of circumstances: (1) where a record was inaccurate when it was filed; (2) where a record was defectively executed; or (3) where the electronic transmission of the record to the Department was defective. Identify all that apply. Note that statements of correction may only be used to correct inaccuracies or defects in a record that existed at the time the record was filed. If the record was accurate when filed but information in it has subsequently changed, the entity can provide the updated information by amending the original filing.

Item 4. Identify the inaccurate statements or other defects in the filed record that are being corrected in this document. If the execution or electronic transmission of the record was defective, describe the manner in which it was defective. Attach additional pages if needed.

Item 5 [IF APPLICABLE]. For each inaccuracy or other defect identified in item 4 that requires correction, provide the corrected text. If the only inaccuracy to be corrected is a defective signature, leave this item blank and proceed to item 6.

Item 6 [IF APPLICABLE]. Complete this item only if the entity seeks to correct a defective signature on a previously filed record. Provide the corrected signature and other information in the space provided. For information regarding who may sign on behalf of the entity, refer to the applicable signature requirements for the document that is being corrected.

Item 7. Signature requirements for this document depend on the nature of the filer:

If the document is being filed by a business corporation, the 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.)

If the document is being filed by a limited partnership or a limited liability limited partnership, the document must be executed by a general partner.

If the document is being filed by any other type of entity, it must be signed by a person authorized by the entity.

Effective date. A statement of correction is effective as of the effective date of the filed record it corrects, except (1) for purposes of sections [178.0103\(4\)](#), [179.0103\(4\)](#), and [183.0103\(4\)](#), Wis. Stats., and (2) as to persons relying on the uncorrected filed record who are adversely affected by the correction. For those purposes and as to those persons, the statement of correction is effective when filed. A statement of correction may not state a delayed effective date.

FILING FEE. The statutory filing fee for this document varies depending on the type of entity that is making the correction:

- For **limited partnerships and limited liability limited partnerships**, the filing fee is **\$15**.
- For **all other entity types**, including limited liability companies, business corporations, nonstock corporations, general partnerships, and limited liability partnerships, the filing fee is **\$40**.