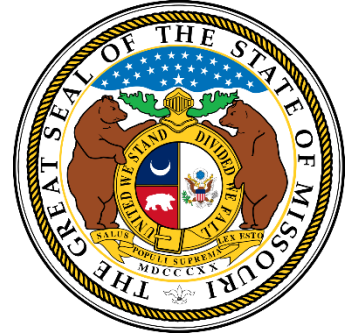


Professional Employer Organization Full Registration (Group)

Denny Hoskins
Secretary of State

(Please Print or Type)



New Application

☐

Renewal

☐

INSTRUCTIONS:

- All sections must be completed; incomplete applications will not be processed.
- See Section 3 for listing of items to accompany the application.
- Each item should be separated with a lettered tab corresponding to the document's item letter in Section 3.
- Payment may be made by check or money order made payable to Missouri Secretary of State or via credit card (which will include a 2% plus \$0.25 convenience fee) by calling (573) 751-4936.
- Questions regarding this application should be directed to PEO@sos.mo.gov or (573) 751-4936.
- Forward completed application with attachments to:

Attn: PEO Registration
Missouri Secretary of State
PO Box 1767
Jefferson City, MO 65102

- Completed applications along with attachments may also be electronically mailed to: PEO@sos.mo.gov

Section 1

Applicant Name	Date of Formation/Incorporation & Fiscal Year End	Federal Employer Identification Number	
DBA Name(s) (Please provide all)			
Business Address of Principal Place of Business	City	State	Zip Code
Additional Missouri Office Locations	City	State	Zip Code
Phone Number	Fax Number	Business E-mail	
Mailing Address	City	State	Zip Code
Contact Person Name	Contact Person Phone Number	Contact Person E-mail	

Section 2**Certification and Attestation of Applicant**

The undersigned owner, partner, officer or director of the applicant hereby certifies, under penalty of perjury, that:

1. All of the information submitted in this application and attachments are true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration denial or revocation and may subject me and the applicant to civil or criminal penalties.
2. The applicant grants permission to the Secretary of State to verify any information supplied with any federal, state or local government agency, current or former employer or company.
3. I authorize the jurisdictions to give any information they may have concerning me to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
4. I acknowledge that I am familiar with the Professional Employer Organization laws and regulations of Missouri for licensure/registration and agree to comply with the requirements set forth in §285.700 – 285.750, RSMo.
5. I further agree that any agreements entered into by the parties will be aware of the requirements and responsibilities set forth in the jurisdictions of which I am applying.

Must be signed and dated by an officer, director, or partner of the Professional Employer Organization, or member or manager of a limited liability company who has authority to act on behalf of the Professional Employer Organization:

Month Day Year

Signature

Typed or Printed Name

Title

Address

City State Zip

Section 3**Attachments must be separated with a lettered tab corresponding to the attachment's letter**

- | | |
|----|--|
| A. | Payment of Filing Fee
New Application: \$500.00 plus an additional \$250.00 per PEO entity in the PEO Group.
Renewal Application: \$250.00 plus an additional \$125.00 per PEO entity in the PEO Group. |
| B. | A list by jurisdiction of each name under which the PEO has operated in the preceding five years, including any alternative names, names of predecessors, and, if known, successor business entities. |
| C. | A statement of ownership, which shall include the name and evidence of the business experience of any person that, individually or acting in concert with one or more other persons, owns or controls, directly or indirectly, twenty-five percent or more of the equity interests of the PEO. |
| D. | A statement of management, which shall include the name and evidence of the business experience of any person who serves as president, chief executive officer, or otherwise has the authority to act as senior executive officer of the PEO. |
| E. | <p>A financial statement setting forth the financial condition of the PEO or PEO group. At the time of application for a new license, the applicant shall submit the most recent audit of the applicant, which shall not be older than thirteen months. Thereafter, a PEO or PEO group shall file on an annual basis, within one hundred eighty days after the end of the PEO's or PEO group's fiscal year, a succeeding audit. An applicant may apply for an extension with the secretary of state, but any such request shall be accompanied by a letter from the auditors stating the reasons for the delay and the anticipated audit completion date.</p> <p>The financial statement shall be prepared in accordance with generally accepted accounting principles and audited by an independent certified public accountant licensed to practice in the jurisdiction in which such accountant is located and shall be without qualification as to the going concern status of the PEO. A PEO or PEO group may submit combined or consolidated audited financial statements to meet the requirements of this section.</p> <p>A PEO that has not had sufficient operating history to have audited financials based upon at least twelve months of operating history shall meet the financial capacity requirements of sections 285.700 to 285.750 and present financial statements reviewed by a certified public accountant.</p> <p>Positive working capital as defined by generally accepted accounting principles at registration as reflected in the financial statements submitted to the secretary of state with the initial registration and each annual renewal.</p> <p>A PEO or PEO group that does not have positive working capital may provide a bond, irrevocable letter of credit, or securities with a minimum market value equaling the deficiency plus one hundred thousand dollars to the secretary of state. Such bond is to be held by a depository designated by the secretary of state securing payment by the PEO of all taxes, wages, benefits, or other entitlement due to or with respect to covered employees if the PEO does not make such payments when due.</p> |
| F. | List of All PEOs in this PEO Group |

The Secretary of State reserves the right to request other documentation necessary to ensure that the applicant meets all qualifications of this application.