



State of Utah
DEPARTMENT OF COMMERCE
Division of Corporations & Commercial Code
Application for Foreign Limited Partnership

File Number _____

Non-Refundable Processing Fee:	
<input type="checkbox"/> New Filing	\$52.00

Exact Name of Limited Partnership

1. A limited partnership of the state of _____, organized on ____ day of _____ 20____, hereby applies for a Certificate of Registration to transact business in the state of Utah.
2. The limited partnership period of duration is: _____
3. The address of the limited partnership principal office in the state of organization is:

Street	City	State	Zip
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4. Registered Agent Name: _____

Street Address of Registered Agent	City	Utah	Zip
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Signature of Registered Agent (Required): _____

If this registered agent is removed for any reason or cannot be found upon reasonable effort, the Director of the Utah Division of Corporations shall act as the registered agent for this foreign limited partnership for purposes of service of process.

5. The business purpose(s) to be pursued in Utah: _____
6. The **names and full addresses** of each general partner are: (additional names and addresses may be listed on the back of this form).

Name	Address	City	State	Zip

7. The street address where a list of all limited partners are kept by name and address, including their capital contributions:

Street	City	State	Zip
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8. A Certificate of Good Standing/Existence from the State of registration dated no earlier than ninety (90) days prior to filing with this office is attached hereto.
9. The limited partnership shall use as its name in Utah _____
(The limited partnership shall use its name as set forth at the top of this form unless this name is not available for use in Utah.)

Under the penalties of perjury, we declare that this application of Certification for Foreign Limited Partnership Registration has been examined by us and is, to the best of our knowledge and belief, true, correct and complete.
(Additional General Partner Signatures may be made on the back of this form.)

By: _____ By: _____
General Partner Signature General Partner Signature

Where to file: Foreign Limited Partnerships will send completed form(s) with a non-refundable processing fee of \$52.00 to the Division of Corporations. Means of payment are: cash, check, or money order made payable to the "State of Utah". Please include one (1) self addressed envelope with application. **If you are faxing you must include, on a cover sheet, the number of a VISA, MasterCard or American Express with the date of expiration.**

Under GRAMA {63-2-201}, all registration information maintained by the Division is classified as public record. For confidentiality purposes, the business entity physical address may be provided rather than the residential or private address of any individual affiliated with the entity.

Mail In: PO Box 146705 Salt Lake City, UT 84114-6705 Walk In: 160 East 300 South, Main Floor Information Center: (801) 530-4849 Toll Free: (877) 526-3994 (within Utah) Fax: (801) 530-6438
