

Secretary of the State of Connecticut

PHONE: 860-509-6003 • EMAIL: crd@ct.gov • WEB: www.concord-sots.ct.gov

APPLICATION FOR RESERVATION OF NAME

DOMESTIC AND FOREIGN - ALL ENTITIES

(STOCK CORPS, NONSTOCK CORPS, LLCs, Limited Partnerships, LLPs AND STATUTORY TRUSTS)

•Use ink. •Print or type. •Attach additional 8 1/2 x 11 sheets if necessary

FILING PARTY (confirmation will be sent to this address):	
NAME:	
ADDRESS:	FILING FEE: \$60.00
	Make checks payable to
CITY:	"Secretary of the State"
STATE: ZIP —	
EMAIL:	
1. NAME TO BE RESERVED (required)	
The undersigned hereby applies for reservation of the following name: (<i>Name to be reserved must include an appropriate business designation (e.g., INC., LLC, Limited Partnership, etc.)</i> :	
2. FULL LEGAL NAME OF THE APPLICANT (required):	
3. ADDRESS OF APPLICANT (required) (must include street number, street name, city, town, state and zip code)	
ADDRESS:	
CITY:	
STATE: ZIP: —	
4. EXECUTION / SIGNATURE (required) (subject to penalties of false statement) (complete items A, B (if applicable), C and D):	
A. NAME OF APPLICANT (hand print or type):	
B. CAPACITY/TITLE OF SIGNATORY:	
C. APPLICANT'S SIGNATURE:	
D. DATE SIGNED (<i>mm/dd/yyyy</i>): / /	
5. EFFECTIVE DATE AND TERM. The reservation will be effective for a period of 120 days from the date of filing with the Secretary of the State. The date of filing is day 1 of the 120 days.	

APPLICATION FOR RESERVATION OF NAME

DOMESTIC AND FOREIGN —ALL ENTITY TYPES

INSTRUCTIONS

Numbers below refer to section numbers on the form.

1. NAME TO BE RESERVED.

- a. Provide the name you intend to reserve. You may reserve the name for exclusive use for any <u>one</u> of the following types of business organizations or entities: A corporation (stock or non-stock), a limited liability company, a limited partnership, a limited liability partnership or a statutory trust. The name that you reserve must contain the appropriate business designation which denotes the type of entity or organization for which you intend to use the name.
- b. Choose a business designation from the list below according to organization type and include it within the name as it appears in section 1 on the form.
 - i. <u>CORPORATE DESIGNATIONS</u>. The name of a corporation must contain one of the following designations: corporation, incorporated, company, Societa per Azioni, limited; or one of the following abbreviations: corp., inc., co., S.p.A., or ltd.
 - ii. <u>LIMITED LIABILITY COMPANY DESIGNATIONS</u>: The name of a limited liability company must contain one of the following designations: Limited Liability Company, L.L.C., LLC, Limited Liability Co., Ltd. Liability Company, or Ltd. Liability Co.
 - iii. <u>LIMITED PARTNERSHIP DESIGNATIONS</u>. The name of a limited partnership must contain, *without abbreviation*, the words "limited partnership."
 - iv. <u>LIMITED LIABILITY PARTNERSHIP DESIGNATIONS</u>. The name of a limited liability partnership must end with one of the following designations: Limited Liability Partnership, L.L.P., or LLP.
 - v. <u>STATUTORY TRUST DESIGNATIONS</u>. The name of a statutory trust must contain one of the following designations: Statutory Trust, Limited Liability Trust, Limited, LLT, L.L.T., or Ltd.
- 2. NAME OF APPLICANT: Print or type the full legal name of the applicant.
- 3. ADDRESS OF APPLICANT: Provide the applicant's street address including street number, street name, city, state and postal code.

4. EXECUTION / SIGNATURE:

- A. Print or type the complete legal name of the signatory,
- B. The signatory's title/capacity (if signing on behalf of an entity)
- C. The signatory's signature.
- D. The date the or she signed the document.

NOTE that the execution constitutes a statement made under the penalties of false statement that the information provided in the document is true.

5. **EFFECTIVE DATE AND TERM**. Pre-filled information. Do not add anything to this section of the form.

OFFICE CONTACT INFORMATION

MAILING ADDRESS: BUSINESS SERVICES DIVISION CONNECTICUT SECRETARY OF THE STATE P.O. BOX 150470 HARTFORD CT 06115-0470

DELIVERY ADDRESS: BUSINESS SERVICES DIVISION CONNECTICUT SECRETARY OF THE STATE 165 CAPITOL AVENUE, SUITE 1000 HARTFORD, CT 06106

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