

**INITIAL/ANNUAL LIST OF GENERAL PARTNERS AND STATE BUSINESS LICENSE**

**APPLICATION OF:**

ENTITY NUMBER



NAME OF LIMITED PARTNERSHIP OR LIMITED-LIABILITY LIMITED PARTNERSHIP

FOR THE FILING PERIOD OF  TO

**USE BLACK INK ONLY - DO NOT HIGHLIGHT**

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

**\*\* YOU MAY FILE THIS FORM ONLINE AT [www.nvsilverflume.gov](http://www.nvsilverflume.gov) \*\***

**IMPORTANT:** Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all general partners. A **General Partner** must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional general partners, attach a list of them to this form.
3. Return the completed form with the filing fee of \$150.00/\$200.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2-1-2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A **copy fee of \$2.00 per page** is required for **each additional copy** generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

**ABOVE SPACE IS FOR OFFICE USE ONLY**

**LIMITED PARTNERSHIP INITIAL AND ANNUAL FILING FEE** (NRS Chapters 87A and 88): \$150.00 LATE PENALTY: \$75.00 (if filing late)  
**LIMITED-LIABILITY LIMITED PARTNERSHIP INITIAL FILING FEE** (NRS Chapters 87A and 88): \$150.00 LATE PENALTY: \$75.00 (if filing late)  
**LIMITED-LIABILITY LIMITED PARTNERSHIP ANNUAL FILING FEE** (NRS Chapter 87A): \$150.00 and (NRS Chapter 88): \$200.00 LATE PENALTY: \$75.00 (if filing late)  
**BUSINESS LICENSE FEE:** \$200.00 LATE PENALTY: \$100.00 (if filing late)

**CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW**

Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

**NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.**

NRS 76.020 Exemption Codes

- 001 - Governmental Entity
- 006 - NRS 680B.020 Insurance Co.

NAME <input type="text"/>	TITLE(S) <b>GENERAL PARTNER</b>
ADDRESS <input type="text"/>	CITY <input type="text"/> STATE <input type="text"/> ZIP CODE <input type="text"/>
NAME <input type="text"/>	TITLE(S) <b>GENERAL PARTNER</b>
ADDRESS <input type="text"/>	CITY <input type="text"/> STATE <input type="text"/> ZIP CODE <input type="text"/>
NAME <input type="text"/>	TITLE(S) <b>GENERAL PARTNER</b>
ADDRESS <input type="text"/>	CITY <input type="text"/> STATE <input type="text"/> ZIP CODE <input type="text"/>
NAME <input type="text"/>	TITLE(S) <b>GENERAL PARTNER</b>
ADDRESS <input type="text"/>	CITY <input type="text"/> STATE <input type="text"/> ZIP CODE <input type="text"/>

None of the general partners identified in the list of general partners has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a general partner in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

**X**  
 \_\_\_\_\_  
**Signature of General Partner or Other Authorized Signature**

Title  Date