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 Secretary of State
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Application for Registration of Foreign Limited-Liability Limited Partnership

(PURSUANT TO NRS CHAPTER 87A)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Foreign Limited-Liability Limited Partnership:	
2. Name Being Registered with Nevada:	The name entity proposes to register and transact business in Nevada:
3. Date and State or Country of Formation:	<input type="text"/> <input type="text"/> <input type="checkbox"/> This entity is in good standing in the jurisdiction of its incorporation/creation. Date Formed State or Country where Authorized
4. Registered Agent for Service of Process: (check only one box)	<input type="checkbox"/> Commercial Registered Agent: <input type="text"/> Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> Office or Position with Entity (name and address below) <hr/> Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity <input type="text"/> <input type="text"/> Nevada <input type="text"/> Street Address City State Zip Code <input type="text"/> <input type="text"/> Nevada <input type="text"/> Mailing Address (if different from street address) City State Zip Code <p style="font-size: small;">This Foreign Limited- Liability Limited Partnership hereby undertakes to keep a list of the names and addresses of the limited partners and their capital contributions at this office until its registration in Nevada is canceled or withdrawn. In the event the above-designated Agent for Service of Process resigns and is not replaced or the agent's authority has been revoked or the agent cannot be found or served with exercise of reasonable diligence, then the Secretary of State is hereby appointed as the Agent for Service of Process.</p>
5. Street Address of Principal Office:	Address of principal office or office required to be maintained in the domicile state by the laws of that state: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Street Address City State Zip Code
6. Name and Business Address of each General Partner: (attach additional page if more than 2)	1) <input type="text"/> Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Business Address City State Zip Code 2) <input type="text"/> Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Business Address City State Zip Code
7. Name and Signature of General Partner Making Statement:	I hereby declare and affirm under the penalties of perjury that I am a General Partner in the above-named Foreign Limited-Liability Limited Partnership and that the execution of this application for registration is my act and deed and that the facts stated herein are true. I also 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. <input type="text"/> X Name Authorized Signature
8. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. X <input type="text"/> <input type="text"/> Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity Date