



Secretary of the State of Connecticut

PHONE: [860-509-6003](tel:860-509-6003) WEBSITE: business.ct.gov EMAIL: bsd@ct.gov

APPLICATION TO RENEW REGISTRATION OF NAME

FOREIGN LIMITED LIABILITY COMPANY C.G.S. § 34-243m

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 8^{1/2} X 11 SHEETS IF NECESSARY

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS): NAME: MAILING ADDRESS: CITY: STATE: ZIP CODE: EMAIL: TELEPHONE NUMBER:		FILING FEE: \$60 MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"
THE UNDERSIGNED HEREBY APPLIES FOR REGISTRATION OF THE FOLLOWING NAME:		
1. LIMITED LIABILITY COMPANY NAME: (MUST INCLUDE BUSINESS DESIGNATION SUCH AS L.L.C., LLC, ETC.)		
2. IF APPLICABLE: THE ALTERNATE NAME ADOPTED PURSUANT TO CGS § 34-275e (MUST INCLUDE BUSINESS DESIGNATION SUCH AS L.L.C., LLC, ETC.)		
3. STATE OR COUNTRY OF FORMATION:	4. DATE OF FORMATION: (MM/DD/YYYY)	
5. NAME OF APPLICANT: REQUIRED:		
6. ADDRESS OF APPLICANT: STREET: CITY: STATE: ZIP CODE: The registration of a name is effective for <u>one</u> year after the date of registration. The registration <u>may</u> be renewed by delivering, to the Secretary of The State, <u>not earlier than ninety days before the expiration date</u> , an application for renewal which complies with C.G.S. § 34-243m.		
7. EXECUTION: DATE (MM/DD/YYYY) _____		
NAME OF APPLICANT	CAPACITY/TITLE OF APPLICANT (print name/title if applicable)	SIGNATURE

INSTRUCTIONS:

Please complete and return this application to renew registration of name form to the Office of the Secretary of the State at the below referenced address.

1. Provide the exact name of the limited liability company in its state of formation which must include an appropriate limited liability company designation. See C.G.S. § 34-243k.
2. Provide the alternate name currently on record adopted pursuant to C.G.S. § 34-275e because the name of the LLC in its state of formation is not available on the records of the Secretary of the State. The alternate name must also contain an appropriate limited liability company designation. (**NOTE:** if the name of the limited liability company at line one has become available, the limited liability company can no longer use an alternate name and should file a registration of name (not a renewal).)
3. Provide the state or country (if outside U.S.A) of formation.
4. Provide the date of formation.
5. Provide the name of the applicant (person or entity) holding the name registration. (Note: the name of the applicant provided must match the name of the applicant currently on record. If the current applicant wishes to transfer the right to hold the registered name to a different party, a "Transfer of Registration of Name" must be filed with this office.)
6. Provide the applicant's address (street, city, town, zip).
7. Please print or type the complete legal name of the signatory, title (if signing on behalf of an entity) and signature. Note that the execution constitutes a statement made under the penalties of false statement that the information provided in the document is true.

When filed, the renewal application renews the registration for a succeeding one-year period. The renewals must be filed not earlier than 90 days from the expiration date of the registration. (Note: if the registration of name has expired, a new registration (rather than a renewal) must be filed.

Please type or print all information.

OFFICE OF THE SECRETARY OF THE STATE**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

PHONE: [860-509-6003](tel:860-509-6003)

WEBSITE: business.ct.gov