



# Secretary of the State of Connecticut

Phone: [860-509-6003](tel:860-509-6003) Website: [business.ct.gov](http://business.ct.gov) Email: [bsd@ct.gov](mailto:bsd@ct.gov)

## Certificate of Domestication - Pursuant to C.G.S. Sec. 34-645 - (see C.G.S. Sec. 34-608 for excluded entities)

All Entities, Domestic or Foreign - USE INK. PRINT OR TYPE. ATTACH 8 1/2" X 11" SHEETS IF NECESSARY.

**Filing Party** (Confirmation will be sent to this address):

Name:

Address:

City:

State:

Zip Code:

Email:

Telephone Number:

**Filing Fee: \$100**

If domesticating into CT must  
also include applicable  
organic document fee see  
instructions.

Make checks payable to  
"Secretary of the State"

**1. Name of the Domesticating Entity (Required- Must include business designation (e.g., LLC, L.L.C., etc.)):**

Jurisdiction and Type of the Domesticating Entity:

State

Country

Entity Type

**2. Name of the Domesticated Entity :(Required - Must include business designation (e.g., LLC, L.L.C., etc.)):**

Jurisdiction and type of the Domesticated Entity:

State

Country

Entity Type

**3. Effective Date of Filing - If not effective upon filing - (Cannot be prior to or more than 90 days after filing date.)**

Date (mm/dd/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**4. Approval Statement - Check Either Box "A" or "B" - Not Both. (Required)**

A:

Plan of domestication was approved by the domesticating Connecticut entity in accordance with CGS Chapter 616, Part V

B:

Plan of domestication was approved by the domesticating foreign entity in accordance with the law of its jurisdiction of organization.



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## 5. Complete section "A" or "B" - Not both

**A:** The state/jurisdiction of the domesticated entity is "Connecticut", and its public organic document attached. (See instructions)

**B:** The state/jurisdiction of the domesticated entity is foreign (not Connecticut) and the domesticated entity appoints the Secretary of the State as its agent for service of process and the mailing address to which process served to this office can be forwarded to is:

Address:

City:

State:

Zip Code:

## 6. Execution / Signature (Required - Subject to penalties of false statement):

Date (mm/dd/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Printed Name	Title/Capacity	Signature

## Certificate of Domestication

### INSTRUCTIONS (*All required sections must be completed*):

C.G.S. 34-645

See *Connecticut General Statutes chapter 616 part V* ("Domestication"). See C.G.S. 34-608 for excluded entities. Use this form if a Connecticut entity is domesticating to another state, or if a foreign entity is domesticating to Connecticut. Note that if the entity type is being changed, do not use this form—see "Certificate of Conversion" form.

The fee to file the Certificate of Domestication is \$100; also, if the domesticated entity's jurisdiction is Connecticut, the public organic document fee must be included as well. (Example 1: a Delaware LLC is domesticating to Connecticut: the total fee will be \$220. Example 2: a Connecticut LLC is domesticating to Delaware: the total fee is \$100.)

"Domesticating entity" - means the domestic entity that approves a plan of domestication pursuant to C.G.S. Sec. 34-643 or the foreign entity that approves a domestication pursuant to the law of its jurisdiction of organization.

"Domesticated entity" means the domesticating entity as it continues in existence after a domestication.

- 1.**Provide: a) The name of the business entity exactly as it is currently on record in its state of formation, b) the state/jurisdiction under which the entity was formed and c) the entity type (e.g. "stock corporation", "limited liability company", etc.) of the domesticating entity.
- 2.**Provide: a) The name of the domesticated business entity as it will appear on record in the new state of domiciled and, b) the new state/jurisdiction under which the entity will be domiciled. (Note that the name of the domesticated entity may be different than the name in its original jurisdiction)
- 3.**If the statement of domestication will be effective upon filing, leave blank; otherwise provide a future effective date (MM/DD/YYYY) which cannot be greater than 90 days from the filing date (Note, future effective date cannot be a date prior to when the filing is received by this office)
- 4.**Approval Statement - If the domesticating entity was formed under the laws of CT, box "A" must be checked; if the domesticating entity was formed under the laws of another state/country, box "B" must be checked.
- 5.**If the domesticated entity's jurisdiction will be Connecticut, attach a copy of the public organic document (e.g., "Certificate of Incorporation", "Certificate of Organization", etc.)
- 6.**If the domesticated entity's jurisdiction is other than Connecticut, provide a mailing address to which the Secretary of the State may send and process served pursuant to C.G.S. 34-646(e).
- 7.**Execution - The form must be signed on behalf of the domesticating entity: Provide the date upon which the document is being signed, the printed name and title of the signer, and their signature.

Office of the Secretary of the State

Mailing Address  
Business Services Division  
P.O. Box 150470  
Hartford, CT 06115-0470

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Business Services Division  
165 Capitol Avenue, Suite 1000  
Hartford, CT 06106

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