State of New Hampshire

NOTICE OF REGISTRATION AS A FOREIGN REGISTERED LIMITED LIABILITY PARTNERSHIP INSTRUCTIONS FOR COMPLETING FORM FLLP-1 (RSA 304-A:50 IV)

- 1. The form must be legibly printed or typed on 8.5" x 11" paper and maintain 1" margins. Pencil or erasable ink is not acceptable.
- 2. FIRST: Exact name of foreign registered limited liability partnership.
- 3. **SECOND:** If the name of the foreign registered limited liability partnership does not contain the words "professional limited, "registered limited liability partnership" or "LLP," "R.L.L.P.," "limited liability partnership," "PLLP," "P.L.L.," "P.L.L.P.," liability partnership," or the abbreviation "L.L.P.," or "PLL," as the last words or letters of its name, insert the name of the limited liability partnership with one of the above designations as the last words or letters.

If the foreign registered limited liability partnership name is not available for use in New Hampshire, enter the name to be used in New Hampshire. In this case a trade name application must be filed with an additional \$50.00 fee. A limited liability partnership designation cannot be used on the trade name. If the foreign registered limited liability partnership name is available, and a trade name in addition to the foreign registered limited liability partnership name is to be used, do not enter the trade name in this space but file a trade name application with a \$50.00 fee.

- 4. THIRD: Complete address (street, town/city, state) of principal office.
- 5. Principal business information is optional and is not part of article third.
- 6. **FOURTH:** State or country of formation.
- 7. FIFTH: Per RSA 304-A:49, a registered agent and registered office must be provided. The registered agent must reside in New Hampshire. The registered agent is the person who would receive service of process should the limited liability partnership be sued. The registered office is the registered agent's business address where the registered agent can be found for in-hand service of process. A street/physical address must be provided. Your application will not be processed without an agent named or if an out of state address is listed.
- 8. **SIGNATURE:** Must be executed by one or more partners authorized to execute the document. If the partner executing the document is other than a natural person, the document shall be executed on the partner's behalf by a general partner of a limited partnership, an officer of a corporation, a member or manager of a limited liability company, or a person authorized by law to execute on behalf of the partner.
- 9. The total filing fee to register is \$100.00, payable to the State of New Hampshire.

NOTES: Any other information the partnership determines to include may be added. If more space is needed, attach additional pages. The name will be searched for availability upon receipt of these documents. If the filing has been accepted, you will receive a filed-stamped copy within 30 days. If you do not receive an acknowledgement, please contact our office. Checks are deposited upon receipt. If the check has been cashed, it only indicates we have received the document. A cashed check is not an indication that the document has been accepted and filed. Please call the Corporation Division (603-271-3246) with any questions you may have regarding this application.

State of New Hampshire

Filing fee: \$100.00 Use black print or type. Form FLLP-1 RSA 304-A:50, IV

NOTICE OF REGISTRATION AS A FOREIGN REGISTERED LIMITED LIABILITY PARTNERSHIP

PURSUANT TO THE PROVISIONS of the New Hampshire Limited Liability Partnership laws, the undersigned hereby submits the following statements for registration to transact business in New Hampshire:

FIRST: The name of the foreign registered limited liability partnership is _____

SECOND: The name which it proposes to register and do business in New Hampshire is _____

THIRD: The address of its principal office is

(no. & street)		(city/town)	(state)	(zip code)
P	rincipal Business Inf	ormation:		
Principal Mailing Address:				
(no. & s	reet)	(city/town)	(state)	(zip code)
Business Phone:				
Business Email:				
Please check if you would pre	fer to receive the cour	tesy Annual Fee Rem	inder by emai	l.
FOURTH: It is formed and registered	under the laws of			
FIFTH: The name of the foreign reginered	stered limited liability p	artnership's initial regi	stered agent i	s:
The complete address of its initial reg	istered office IN NEW	HAMPSHIRE (agent's	s business ado	dress) is:
(no. & street)		(city/town)	(state)	(zip code)
SIXTH: The business in which the pa	artnership engages is (brief statement and if	known, list the	• NAICS
Code and Sub Code):				

*Signature: Print or type name:	
Date signed:	
Complete address of person signing:	

Note: The sale or offer for sale of interests of the limited liability partnership will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B). The interests of the limited liability partnership: 1) have been registered or when offered will be registered under RSA 421-B; 2) are exempted or when offered will be exempted under RSA 421-B; 3) are or will be offered in a transaction exempted from registration under RSA 421-B; 4) are not securities under RSA 421-B; OR 5) are federal covered securities under RSA 421-B. The statement above shall not by itself constitute a registration or a notice of exemption from registration of securities within the meaning of sections 448 and 461(i)(3) of the United States Internal Revenue Code and the regulation promulgated thereunder.

* **SIGNATURE:** Must be executed by one or more partners authorized to execute the document. If the partner executing the document is other than a natural person, the document shall be executed on the partner's behalf by a general partner of a limited partnership, an officer of a corporation, a member or manager of a limited liability company, or a person authorized by law to execute on behalf of the partner.

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mailing Address - Corporation Division, NH Dept. of State, 107 N Main St, Rm 204, Concord, NH 03301-4989 Physical Location - State House Annex, 3rd Floor, Rm 317, 25 Capitol St, Concord, NH