

State of New Hampshire

APPLICATION FOR REGISTRATION AS A FOREIGN FOUNDATION NOTES FOR COMPLETING FORM FFND-1 (RSA 564-F:21-2102)

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. **Article First:** The **EXACT** name of the foundation as registered with the state of formation's secretary of state. The name must match exactly as on record **including punctuation** wherever it appears on the form.
3. **Article Second:** If the name of the foundation does not contain the word "foundation," "stichting," or the abbreviation "fnd." or "stak.", insert the name of the foundation with the word or abbreviation which it elects to add thereto for use in New Hampshire.

OR

If the foundation 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 corporate designation cannot be used on the trade name.)

4. **Article Third:** The complete address of its principal office. This must be a street address, city, state and zip code; post office box, if any, may be included. All mail will be directed to this address unless otherwise specified.
5. Principal business information is optional and is not part of Article Third.
6. **Article Fourth:** The state of formation or country (if outside the U.S.) must be listed.
7. **Article Fifth:** The exact date of incorporation with the foundation's state of domicile's Secretary of State. This must be a month/day/year date. The period of duration is to be listed. If there is none then it must be listed as "perpetual" or "ongoing".
8. **Article Sixth:** Per RSA 564-F:21-2107, 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 corporation 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.**
9. **Article Seventh:** RSA 564-F:21-2101 registerable activities (purpose).
10. **Article Eighth:** Please list the names and addresses of **all** of the current directors; use an additional sheet if necessary.
11. **Application Signatures:** The forms must be signed by a director or another foundation official.
12. The total filing fee to register is \$100.00, payable to the State of New Hampshire.

PLEASE NOTE: 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.

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

State of New Hampshire

Filing fee: \$100.00
Use black print or type.

Form FFND-1
RSA 564-F:21-2102

APPLICATION FOR REGISTRATION AS A FOREIGN FOUNDATION

PURSUANT TO THE PROVISIONS of the New Hampshire Foundation Act, the undersigned hereby applies for registration in New Hampshire and submits the following statement:

FIRST: The name of the foundation is _____
_____.

SECOND: The name which it elects to use in New Hampshire is _____
_____.

THIRD: The complete address (including zip code and post office box, if any) of its principal office is:

(no. & street) (city/town) (state) (zip code)

Principal Business Information:

Principal Mailing Address: _____
(no. & street) (city/town) (state) (zip code)

Business Phone: _____

Business Email: _____

Please check if you would prefer to receive the courtesy Annual Report Reminder by email.

FOURTH: It is formed under the laws of _____.

FIFTH: The date of its formation is _____ and the period of its duration is _____.

SIXTH: The name of its registered agent **IN NEW HAMPSHIRE** is:

The complete address of its registered office **IN NEW HAMPSHIRE** (agent's business address) is:

(no. & street) (city/town) (state) (zip code)

SEVENTH: Describe the principal activities (purpose or purposes) which it proposes to pursue in the transaction of business in New Hampshire (and if known, list the NAICS Code and Sub Code):

_____.

EIGHTH: The names and usual business addresses of its directors are: (If there are additional directors, attach additional sheet)

<u>Name</u>	<u>Address</u>
<u>DIRECTORS</u>	
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
_____ Name (please print)	_____ Street
	_____ City/Town State Zip
	_____ (Foundation Name)
	_____ (Signature)
	_____ (Print or type name)
	_____ (Title)
	Date signed: _____

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

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