



**State of North Carolina  
Department of the Secretary of State**

**APPLICATION FOR REGISTRATION  
Foreign Registered Limited Liability Partnership**

Pursuant to §59-91 of the General Statutes of North Carolina, the undersigned hereby submits this application for registration as a Foreign Registered Limited Liability Partnership.

1. The name of the foreign limited liability partnership is: \_\_\_\_\_
2. If the name of the foreign limited liability partnership is unavailable for use in the State of North Carolina, the name the limited partnership wishes to use is: \_\_\_\_\_

\_\_\_\_\_  
(The name must contain the words "Registered Limited Liability Partnership," "Limited Liability Partnership," or the abbreviation "L.L.P.," "R.L.L.P.," "LLP," or "RLLP".)

3. The street address of the partnership's principal office is:  
Principal Office Telephone Number: \_\_\_\_\_  
Number and Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

The mailing address, *if different from the street address*, of the partnership's principal office is:

Number and Street or PO Box: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

4. The name of the initial registered agent is: \_\_\_\_\_
5. The street address and county of the initial registered agent's office of partnership in North Carolina is:

Number and Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: NC Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

The mailing address, *if different from the street address*, of the initial registered office is:

Number and Street or PO Box: \_\_\_\_\_  
City: \_\_\_\_\_ State: NC Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

**NOTES:**

**Filing fee is \$125. This document must be filed with the Secretary of State.**

6. (Optional): Please provide a business e-mail address: \_\_\_\_\_.  
The Secretary of State's Office will e-mail the business automatically at the address provided at no charge when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is being offered, please see the instructions for this document.
7. Attached is a Certificate of Existence (or document of similar import) duly authenticated by the secretary of state or other official having custody of limited liability partnership records in the state or country of registration. **The Certificate of Existence must be less than six months old.**
8. The fiscal year end of the partnership: \_\_\_\_\_.
10. This registration will be effective upon filing, unless a future date and/or time is specified: \_\_\_\_\_.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
*(Business Entity Name)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Type or Print Name and Title*

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**Instructions for Completing Application for Registration as a  
Foreign Registered Limited Liability Partnership**

*(Form LLP-02)*

1. Enter the name of the registered limited liability partnership exactly as it appears in the partnership agreement, or as later amended and of the record in the home state or country.
2. If the name of the registered limited liability partnership is unavailable for use in this State, enter the proposed name under which the partnership is to register and transact business in North Carolina. The name must contain the words "Limited Partnership," or the abbreviation "L.P." or "LP," or the combination "Ltd. Partnership". [G.S. §§ 55D-20 and 55D-22.]
3. Enter the telephone number and the street address of the principal office. The mailing address of the principal office must also be entered if it is different from the street address.
4. Enter the name of the registered agent. The registered agent may be an individual who resides in this State and whose business office is identical with the registered office; a domestic corporation, nonprofit corporation, or limited liability company whose business office is identical with the registered office; or a foreign corporation, foreign nonprofit corporation, or foreign limited liability company authorized to transact business or conduct affairs in this State. If the registered agent is an individual, enter the first name, middle initial, and last name. If the registered agent is a domestic or foreign corporation, nonprofit corporation or limited liability company, enter the entity's name. [G.S. §§ 55D-30 and 59-902(a)(5).]
5. Enter the street address of the registered agent's office. The mailing address of the registered office must also be entered if it is different from the street address.
6. (Optional): The Department offers a free voluntary notification system for which you may choose to participate. If you would like to receive this free service, please provide a business e-mail address in the space provided. Your participation will not result in your e-mail address being viewable on our website. Participation will help us to prevent identity theft in the event an unauthorized person submits a fraudulent document for filing in the name of the business entity.
7. A Certificate of Existence from the home jurisdiction is required. The document should be certified within the last six months.
8. Indicate the fiscal year end of the partnership. This would be specific to a day and month. (e.g. December 31st)
9. The document will be effective on the date and at the time of filing, unless a delayed date or an effective time (on the day of filing) is specified. If a delayed effective date is specified without a time, the document will be effective at 11:59:59 p.m. on the day specified. If a delayed effective date is specified with a time, the document will be effective on the day and time so specified. A delayed effective date may be specified up to and including the 90<sup>th</sup> day after the day of filing.

SIGNATURE:            This document must be executed by at least one general partner.

NOTES:

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