



State of Alaska
Division of Corporations, Business and Professional Licensing
CORPORATIONS SECTION
PO Box 110806
Juneau, AK 99811-0806
Phone: (907) 465-2550
Fax: (907) 465-2974
Website: www.commerce.alaska.gov/occ

CERTIFICATE OF REGISTRATION

Foreign Limited Partnership

AS 32.11.420

Filing Fee: \$150.00

INSTRUCTIONS *(Please retain for your records):*

Refer to Alaska Statutes 32.11.420. Before transacting business in this state, a foreign limited partnership shall submit to this department an application for foreign limited partnership, signed and sworn to by a general partner.

ITEM 1: A foreign limited partnership may register with the department under any name, whether or not it is the name under which it is registered in its state of organization, that includes without abbreviation the words "limited partnership" and that could be registered by a domestic limited partnership. The name must be distinguishable upon the record. To search the availability of the legal name of the limited liability partnership in the State of Alaska, go to the Corporations Section at www.commerce.alaska.gov/occ and select Search Corporations Database.

The entity must be in good standing in their state of domicile, before we can issue a certificate of authority, please check the box.

ITEM 2: The assumed name the corporation elects to use in Alaska if the legal name is not available. To search the availability of the legal name of the corporation in the State of Alaska click Search Corporations on the left hand side of the Forms and Fees page of our website.

ITEM 3: Indicate the state of domicile, or "home state", and the date of organization in the state of domicile (mm/dd/yyyy format).

ITEM 4: The registered agent of this foreign LP must be an individual who is a resident of Alaska, or a corporation (excluding LLC, LP and LLP) registered and in good standing with this office. The registered agent is statutorily responsible for receiving and forwarding processes, notices, or demands on to the last known address of the entity. A LP may not act a registered agent. A physical address and a mailing address in the State of Alaska must be given.

ITEM 5: This statement is required by statute. The commissioner is appointed the agent of the foreign limited partnership for service of process if an agent has not been appointed, or, if appointed, the agent's authority has been revoked or it the agent cannot be found or served with the exercise of reasonable diligence.

ITEM 6: Provide the principal office address of the partnership in the state of domicile.

ITEM 7: Provide the name and address of each general partner.

ITEM 8: Provide the address of the administrative office of the partnership where a list is kept of the names and addresses of the limited partners and their capital contributions.

Signatures

The Certificate of Registration must be signed and sworn by a general partner.

NOTE: Persons who sign documents filed with the commissioner that are known to the person to be false in material respects, is guilty of a class A misdemeanor.

Mail the Certificate of Registration and the \$150.00 filing fee in U.S. dollars to:
State of Alaska, Corporations Section, PO Box 110806, Juneau, AK 99811-0806

STANDARD PROCESSING TIME for complete and correct applications submitted to this office is approximately 10-15 business days. All applications are reviewed in the date order they are received.

ADDITIONAL RESOURCES:

- **Professional License:**

For information regarding what professions require a Professional License, statutes, how to obtain a Professional License, and/or the expiration date if you already have a Professional License, go to the Professional License Section of our website at www.commerce.alaska.gov/occ.

- **Business License:**

For the privilege of engaging in a business in the State of Alaska, a Business License is required for a new entity. For information regarding business licenses, statutes, and how to obtain a Business License, go to the Business License Section of our website at www.commerce.alaska.gov/occ.

- **Alaska Corporate Net Income Tax**

Every corporation earning gross income from sources within the state, except for those corporations that are specifically exempted, must file a corporation net income tax return. Contact the Alaska Department of Revenue, Tax Division, PO Box 110420, Juneau, Alaska, 99811-0420, telephone number (907) 465-2320 for more information.



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CERTIFICATE OF REGISTRATION
Foreign Limited Partnership
AS 32.11.420

\$150.00 Filing Fee

Pursuant to Alaska Statutes 32.11.420, the undersigned partnership applies for a Certificate of Registration and, for that purpose, submits the following statement:

ITEM 1: The legal name of the limited partnership (the name must include the words "limited partnership" without abbreviation):

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This foreign entity is active and in good standing in the state/country of domicile.

ITEM 2: The assumed name the partnership elects to use in Alaska if the legal name is not available:

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ITEM 3: The state of domicile, or "home state", and the date of formation in the state of domicile:

State of domicile:	Date of Formation: ___/___/___
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ITEM 4: Registered agent name and address (must include a physical and mailing address in Alaska):

Name:			
Physical address:	City:	AK	Zip Code:
Mailing address:	City:	AK	Zip Code:

ITEM 5: The commissioner is appointed the agent of the partnership for service of process in the event that the foreign limited partnership fails to appoint or maintain a registered agent.

ITEM 6: Principal office address of the company in the state or country of domicile:

Name:		
Mailing address:		
City:	State/Province:	Country:

ITEM 7: The names and addresses of each general partner:

Name	Mailing address	City	State	ZIP code

Attach additional sheet if necessary.

ITEM 8: Address of the administrative office of the partnership where a list is kept of the names and addresses of the limited partners and their capital contributions:

Name:		
Mailing address:		
City:	State/Province:	Country:

Signatures: The Certificate of Registration must be signed and sworn by a general partner.

Signature of General Partner	Printed Name of General Partner	Date

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CONTACT INFORMATION SHEET

Please return this document with your filing. This information will only be used to resolve questions with the filings attached. **NOTE:** this form will not be filed for record or appear online.

Name of entity as it appears on filing:

To resolve questions with this filing, contact:

Name:	
Email:	Phone:
Mailing address:	

Return documents to:

Name:
Company:
Mailing address:

Attach this form to your filings. Send all documents to:
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