

**APPLICATION FOR REGISTRATION
FOREIGN LIMITED PARTNERSHIP**

(SS-4473)

Page 1 of 2



Business Services Division
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks AVE, 6th
FL.

Filing Fee: \$600

For Office Use Only

Pursuant to the provisions of the Tennessee Revised Uniform Partnership Act, Section 61-2-92, the undersigned foreign limited partnership submits the following application for registration:

1. The name of the foreign limited partnership is: _____

If different, the name under which the foreign limited partnership is to be obtained:

(Note: Pursuant to the Tennessee Revised Uniform Limited Partnership Act, Section 61-2-904(a), each foreign limited partnership name must contain the words "Limited Partnership" or the abbreviation L.P.)

2. This limited partnership was formed under the laws of the State/Country of: _____
and the effective date of formation was _____

3. The above-named foreign limited partnership validly exists as a limited partnership under the laws of the jurisdiction of its organization as of the date of this filing.

4. The name of the registered agent and complete registered office address in Tennessee is:

Agent's name: _____

Registered Office Street Address: _____

City: _____ ST: _____ Zip _____ County: _____

5a. The complete address of the principal office is:

Principal Street Address: _____

City: _____ ST: _____ Zip _____ County: _____

5b. The mailing address (if different from the principal street address) is:

Mailing Address: _____

City: _____ ST: _____ Zip _____ County: _____

6. The general nature of the business to be conducted or promoted in the State of Tennessee is:

7. The name and complete address of each general partner is:

General Partner's Name: _____

General Partner's Street Address: _____

City: _____ ST: _____ Zip _____ County: _____

General Partner's Name: _____

General Partner's Street Address: _____

City: _____ ST: _____ Zip _____ County: _____

☐ Additional general partner(s) is/are listed on the attached(number of) page(s) which is/are fully incorporated herein by reference.

(check and complete if applicable)

***Note: Pursuant to T.C.A. § 10-7-503 all information on this form is public record.**

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8 If applicable, this limited partnership has the additional designation of:

9. If the limited partnership commence doing business in Tennessee prior to the approval of the application, the date of commencement (month, day and year) _____.
NOTE: Additional filing fees may apply. See section 61-2-907(d).

10. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is: _____(date), _____(time).
(Note: A delayed effective date may not be later than the 90th day after the date this document is filed by the Secretary of State.)

11. This foreign limited partnership hereby elects to be governed by the Tennessee Revised Uniform Limited Partnership Act.

NOTE: A certificate of existence (or a document of similar import) duly authenticated by the Secretary of State or other official having custody of limited partnership records in the jurisdiction under whose law it was formed, is attached. The certificate shall not bear a date of more that two (2) months prior to the date the application is filed. Section 61-2-902(2)

Signature

Signature Date

Printed Name

Signer's Capacity

(Note: The application must be executed by one or more authorized partners. Attach additional sheet if neccessary)

Partner's Signature

Signature Date

Printed Name

Partner's Signature

Signature Date

Printed Name