

**Form must be filed electronically.**

Paper forms are not accepted.

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### **Statement of Trade Name Renewal of a Domestic Limited Partnership**

filed pursuant to §7-71-105 of the Colorado Revised Statutes (C.R.S.)

1. For the domestic limited partnership delivering this statement, its ID number and true name are

ID number

\_\_\_\_\_  
(Colorado Secretary of State ID number.)

True name

\_\_\_\_\_.

2. The document number of the statement of trade name to be renewed and the trade name under which such limited partnership transacts business in this state, as stated in such statement of trade name, are

Document number

\_\_\_\_\_

Trade name

\_\_\_\_\_.

3. The registered agent name and registered agent address of the registered agent are

Name

(if an individual)

\_\_\_\_\_  
(Last) (First) (Middle) (Suffix)

**OR**

(if an entity)

(**Caution:** Do not provide both an individual and an entity name).

\_\_\_\_\_

The person appointed as registered agent above has consented to being so appointed.

Street address

\_\_\_\_\_  
(Street number and name)

\_\_\_\_\_

\_\_\_\_\_  
(City) CO (State) (Zip Code)

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
(Street number and name or Post Office Box information)

\_\_\_\_\_

\_\_\_\_\_  
(City) CO (State) (Zip Code)

(If the following statement applies, adopt the statement by marking the box.)

☐

The mailing address in the records of the Secretary of State is no longer different than the street address and is no longer required.

4. The principal office address of such limited partnership's principal office is

Street address

\_\_\_\_\_  
(Street number and name)

\_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Postal/Zip Code)  
\_\_\_\_\_  
(Province – if applicable) (Country – if not US)

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
(Street number and name or Post Office Box information)  
\_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Postal/Zip Code)  
\_\_\_\_\_  
(Province – if applicable) (Country – if not US)

(If the following statement applies, adopt the statement by marking the box.)

- ☐ The mailing address in the records of the Secretary of State is no longer different than the street address and is no longer required.

5. The principal address of such limited partnership is

Street address

\_\_\_\_\_  
(Street name and number)  
\_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Postal/Zip Code)  
\_\_\_\_\_  
(Province – if applicable) (Country – if not US)

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
(Street number and name or Post Office Box information)  
\_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Postal/Zip Code)  
\_\_\_\_\_  
(Province – if applicable) (Country – if not US)

(If the following statement applies, adopt the statement by marking the box.)

- ☐ The mailing address in the records of the Secretary of State is no longer different than the street address and is no longer required.

6. A brief description of the kind of business transacted or contemplated to be transacted in this state under such trade name is

\_\_\_\_\_.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

- ☐ This document contains additional information as provided by law.

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8. The true name and mailing address of the individual causing this document to be delivered for filing are

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_____			
(Street number and name or Post Office Box information)			
_____			
_____		_____	_____
(City)		(State)	(Postal/Zip Code)
_____		_____	
(Province – if applicable)		(Country – if not US)	

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

- ☐ This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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