



**STATE OF WASHINGTON  
SECRETARY OF STATE**

This Box For Office Use Only

## Limited Liability Partnership

- Amended Notice \$30.00 (Expedited Notice \$80.00)
- Annual Notice \$60.00 (Expedited Notice \$110.00)
- Withdrawal Notice \$0 (Expedited Notice \$50.00)

UBI Number:

## LIMITED LIABILITY PARTNERSHIP NOTICE

### SECTION 1

**NAME OF LIMITED LIABILITY PARTNERSHIP:** *(as currently recorded with the Office of the Secretary of State)*

\_\_\_\_\_

**DATE REGISTERED IN WASHINGTON STATE:** \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

### SECTION 2

**ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS:**

*(Where records are maintained, see instructions page)*

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If originally formed outside Washington State provide the State/Country of origin: \_\_\_\_\_

### SECTION 3

**NUMBER OF PARTNERS OF THE LIMITED LIABILITY PARTNERSHIP:** \_\_\_\_\_

### SECTION 4

**LIST ANY CHANGES/AMENDMENTS BEING MADE TO THE LIMITED LIABILITY PARTNERSHIP:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 5**

*(Only required if changes are being made to the Registered Agent)*

**NAME AND ADDRESS OF THE WASHINGTON STATE REGISTERED AGENT:**

**Name:** \_\_\_\_\_

**Physical Location Address (required):**

City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

**Mailing or Postal Address (optional):**

City \_\_\_\_\_ WA Zip Code \_\_\_\_\_

**CONSENT TO SERVE AS REGISTERED AGENT:**

I consent to serve as Registered Agent in the State of Washington for the above named limited liability partnership. I understand it will be my responsibility to accept Service of Process on behalf of the limited liability partnership; to forward mail to the limited liability partnership; and to immediately notify the Office of the Secretary of State if I resign or change the Registered Office Address.

X \_\_\_\_\_  
**Signature of Registered Agent** Printed Name Date

**SECTION 6 (Required Annually)**

**OWNERSHIP OF REAL PROPERTY:**

Does your company own land, buildings, or other real property in Washington? **Yes**  **No**

**CONTROLLING INTEREST TRANSFER:**

A controlling interest transfer is when 50 % or more of the ownership in an entity changes hands as defined under RCW 82.45.010 (2). Has there been a transfer of stock, other financial interest change, or an option agreement exercised during the past 12 months that resulted in a transfer of controlling interest? **Yes**  **No**

Has an option agreement been executed in the last 12 months allowing for the future purchase or acquisition of the entity, that, if exercised would result in a transfer of controlling interest? **Yes**  **No**

If your company owns land, buildings or other real property in Washington State, you must contact the Washington State Department of Revenue to report a transfer of controlling interest. Failure to report the transfer is subject to the penalty provisions of RCW 82.45.220. For more information on these questions please call the Department of Revenue at (360) 570-3265 and choose option 1, or visit the website at [www.dor.wa.gov](http://www.dor.wa.gov)

**SECTION 7**

**AUTHORIZED SIGNATURE:** *(see instructions page)*

*This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.*

X \_\_\_\_\_  
**Signature** Printed Name/Title Date Phone

## **INSTRUCTIONS – LIMITED LIABILITY PARTNERSHIP NOTICES**

Please complete all sections of the Limited Liability Partnership Notice. **USE DARK INK ONLY.** For an electronic, fillable version of this form, please visit our website at [www.sos.wa.gov/corps](http://www.sos.wa.gov/corps)

**UBI Number:** Enter your existing Unified Business Identifier (UBI Number) as currently recorded with the Office of the Secretary of State, in the box in the upper right hand corner of page 1.

### **Section 1**

Indicate the Limited Liability Partnership (LLP) name as currently registered with the Office of the Secretary of State, Indicate the date the LLP was first registered in Washington State, and enter the UBI number as registered with the Office of the Secretary of State in the space provided in the top right corner of this form. It is advised that you contact the Secretary of State to check for name availability before filing name changes at 360-725-0377.

### **Section 2**

Enter the address of the Limited Liability Partnership's principal place of business where records are maintained. If the principal place of business is outside the State of Washington indicate the state/country of origin and complete section 6 if changes are being made to the registered agent information.

### **Section 3**

List the number of partners in the Limited Liability Partnership.

### **Section 4**

Provide a description of changes or amendments to be made to the Limited Liability Partnership. It is advised that you contact the Secretary of State to check for name availability before filing name changes at 360-725-0377.

### **Section 5**

Complete this section if there are changes to the LLP's Registered Agent. All Limited Liability Partnerships must have a Registered Agent in Washington State if there is no principal place of business in the State of Washington. The Registered Agent may be an individual who is a resident of Washington State, or a business entity registered with the Secretary of State's office. The agent **must have** a physical address in Washington State where they can be located. An alternative mailing address may be used in addition to the physical address. The mailing address must also be in Washington State. **The Registered Agent must print their name and sign the consent to serve as registered agent.**

### **Section 6**

This is a required section for annual notices or if changes have been made. Answer Yes or No to the questions in section 6. For more information please review RCW 82.45.220.

### **Section 7**

The Amended, Annual, or Withdrawal Notice must be executed by a partner or other authorized person. If necessary attach additional names, addresses, titles and signatures.

### **Additional Information:**

**FEES:** The filing fee for an Amended Notice is \$30.00. The filing fee for an Annual Notice is \$60. There is no filing fee for a notice of withdrawal. All notices have the option to request expedited service.

If expedited service is requested, include an additional \$50.00 and write "EXPEDITE" on the outside of the envelope. Make the checks or money orders payable to "Secretary of State". **(ALL fees are non-refundable)**

### **Mail completed forms and payment to:**

Secretary of State, Corporation Division, 801 Capitol Way S, PO Box 40234, Olympia WA 98504-0234

If you have questions, need assistance or would like to provide feedback please visit the Corporations Division website at [www.sos.wa.gov/corps](http://www.sos.wa.gov/corps) or call 360-725-0377.

