DEPARTMENT OF STATE

Bureau of Corporations and Charitable Organizations; Proposed Official Forms

The Department of State (Department), Bureau of Corporations and Charitable Organizations (Bureau) proposes to amend 19 Pa. Code Appendix C (relating to official forms) to read as set forth in Annex A.

A. Effective Date

The proposed forms will be effective on February 21, 2017.

B. Statutory Authority

The Department has the authority to promulgate Bureau sample forms and instructions under 15 Pa.C.S. § 133 (relating to powers of Department of State). Section 133(a)(1) of 15 Pa.C.S. specifies that sample filing forms shall not be agency regulations and are therefore explicitly excluded from the requirements of section 612 of The Administrative Code of 1929 (71 P.S. § 232) and review under the Commonwealth Attorneys Act (71 P.S. §§ 732-101—732-506) and the Regulatory Review Act (71 P.S. §§ 745.1—745.14). Section 133(a)(1) of 15 Pa.C.S. does, however, require that the forms and instructions be subject to the opportunity for public comments under section 201 of the act of July 31, 1968 (P.L. 769, No. 240) (45 P.S. § 1201), known as the Commonwealth Documents Law (CDL).

C. Description of Proposed Revisions

This proposal revises 21 of the 68 existing forms and instructions promulgated by the Department relating to association and fictitious name filings under 15 Pa.C.S. (relating to corporations and unicorporated associations) and 54 Pa.C.S. (relating to names) and currently published in the *Pennsylvania Code*. This proposal also introduces 11 new forms. Finally, three forms are repealed. The need for these revisions is based on the passage of two acts by the General Assembly: the act of November 3, 2016 (P.L. 1053, No. 135) (Act 135) and the

act of November 21, 2016 (P.L. 1328, No. 170) (Act 170), as well as the Department's ongoing review of its forms and procedures.

Act 135 became effective on January 2, 2017. Act 135 exempts veterans and reservists who are starting a small business in this Commonwealth from the payment of a business fee. The Bureau is amending seven of its business formation forms to include a checkbox for veterans and reservists who are claiming the exemption and information about how to obtain the fee waiver in the instructions.

Act 170 will be effective on February 21, 2017. Act 170 amends 15 Pa.C.S. and 54 Pa.C.S. to repeal and replace existing Commonwealth law on general partnerships, limited partnerships and limited liability companies with the most recent revisions of three acts promulgated by the Uniform Law Commission: the Uniform Partnership Act; the Uniform Limited Partnership Act; and the Uniform Limited Liability Company Act. Act 170 also includes amendments to Commonwealth law on limited liability partnerships and limited liability limited partnerships. Amendments were also made to general provisions of 15 Pa.C.S. and 54 Pa.C.S., including conforming amendments to 15 Pa.C.S. Part II, Subpart B (relating to Business Corporation Law of 1988) and 15 Pa.C.S. Part II, Subpart C (relating to Nonprofit Corporation Law of 1988).

The result of Act 170 is that a significant number of the Bureau's forms require revision. The Bureau also developed 11 new forms to comply with Act 170. The Bureau is continuing its practice of numbering forms relating to the statutory title and section which authorize or require the filing. The Bureau's new and revised forms also maintain the more recently adopted practice of barcoding all forms and giving the option of e-mail return of filings. It should be noted that, like the filer return address which has appeared on forms and filed documents since at least 2001, the e-mail return address also will appear on the filed document and thus will be publically available as part of the filed document in the same manner.

New Forms Required by Act 170

New Forms Required by .	Act 170
DSCB Form Number	Form Name
15-8433	Certificate of Partnership Authority
15-8434	Certificate of Denial of Partnership Authority
15-8482(b)(2)(i)	Certificate of Dissolution
15-8482(b)(2)(vi)	Certificate of Termination
15-8636	Certificate of Negation
15-8681.1	Voluntary Termination by Partners (never transacted business)
15-8832	Certificate of Authority/Amend/Cancel
15-8833	Certificate of Denial
15-8872(b)(2)(i)	Certificate of Dissolution—Domestic Limited Liability Company
15-8878	Voluntary Termination by Members/Organizers (never transacted business)
15-8898	Annual Benefit Report (Benefit LLC)

Form Amendments Required by Act 170

DSCB Form Number	Form Name (New Name and Number if Applicable)
15-209	Application for Registration of Name of Nonregistered Foreign Association

DSCB Form Number	Form name (New Name and Number if Applicable)	
15-412	Foreign Registration Statement	
15-413	Amendment of Foreign Registration Statement	
15-418	Transfer of Foreign Registration	
15-1507/5507/ 8506/8906	Statement or Certificate of Change of Registered Office (New number—15-1507/5507/8625/8825)	
15-1971/5971	Articles of Dissolution Before Commencement of Business—Domestic Corporation (New name—Voluntary Dissolution (Never Transacted Business) Domestic Business Corporation)	
15-3331	Annual Benefit Report	
15-8201A	Statement of Registration—Domestic Registered Limited Liability Partnership (new name—Statement of Registration—Domestic Limited Liability Partnership)	
15-8201B/8201C	Statement of Amendment/Termination—Domestic Registered Limited Liability Partnership	
15-8221/8998	Certificate of Annual Registration	
15-8511	Certificate of Limited Partnership (new number 15-8621)	
15-8512/8951	Certificate of Amendment—Limited Partnership/Limited Liability Company (new number—15-8622/8822)	
15-8524/8532	Certificate of Withdrawal by Partner (new name and number—15-8474/8665 Certificate of Dissociation as General Partner)	
15-8513	Certificate of Cancellation—Limited Partnership (new name and number—15-8682(e) Certificate of Termination—Limited Partnership)	
15-8913	Certificate of Organization—Domestic Limited Liability Company (new number 15-8821)	
15-8975	Certificate of Dissolution—Domestic Limited Liability Company (new name and number—15-8872(f) Certificate of Termination—Domestic Limited Liability Company)	
54-502	Registration of Unincorporated Association Name (new name—Registration or Renewal of Unincorporated Association Name)	

Form Amendments Required by Act 135

15-1306/2102/ 2303/2703/2903/ 3101/3303/7102	Articles of Incorporation (for profit)
15-5306/7102	Articles of Incorporation (nonprofit)
DSCB:54-311	Registration of Fictitious Name

Forms Deleted by Act 170

15-8205	Statement of Withdrawal from Registered Limited Liability Partnership
15-8515	Certificate Pursuant to Judicial Order—Limited Partnership
15-8519	Certificate of Summary of Record—Limited Partnership

Other Form Amendments

15-134A	Docketing Statement—New
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The new and revised forms are set forth in Annex A. Even though Rule 2.12(a) of the *Pennsylvania Code and Bulletin Style Manual* recommends that forms be referenced in regulations rather than adopted in regulations, 15 Pa.C.S. § 133 requires that the forms and instructions be published in the *Pennsylvania Code*.

D. Fiscal Impact

Although this proposal would not have measurable fiscal impact upon the Commonwealth, its political subdivisions or the private sector, a formal fiscal analysis was not conducted because these forms are exempt from section 612 of The Administrative Code of 1929.

E. Paperwork Requirements

This proposal would not create new paperwork. The incorporation or formation of most associations in the Commonwealth necessarily requires a filing with the Department. This proposal simply updates the sample forms relating to association and fictitious name filings to comply with current law.

F. Regulatory Review

Under 15 Pa.C.S. § 133(a), sample forms are exempt from the requirements of the Regulatory Review Act, but shall be subject to the opportunity of public comment requirement under section 201 of the CDL.

G. Public Comment

Under 15 Pa.C.S. § 133(a)(1), which requires that publication of these forms be subject to the opportunity for public comment, the Department invites interested persons to submit written comments, suggestions or objections regarding this proposal to Martha H. Brown, Assistant Counsel, Department of State, Office of Chief Counsel, 306 North Office Building, Harrisburg, PA 17120, within 30 days following publication of this notice in the Pennsylvania Bulletin. Reference "Bureau of Corporations and Charitable Organizations—Official Forms" when submitting comments.

> PEDRO A. CORTÉS Secretary

Annex A

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Docketing Statement - New Entity DSCB:15-134A (rev. 2/2017)

1. Entity Name:				
In the case of a foreign associational ternate name should be given.	n which must use an alternate name to	register to do busines	s in Pennsylv	vania, the
2. Tax Responsible Party				
Name of individual responsible for	r initial tax reports:			
Mailing address of individual resp	onsible for initial tax reports:			
Number and street	City	State	Zip	County
3. Description of Business Activ	ity:			
4. FEIN [Employer Identification	on Number/Federal Tax Identification	on Number]:	·	
without added delay. If the busine	that Commonwealth accounts are pross entity does not currently have an Foage http://www.irs.gov/Businesses/St	EIN, it can get a FEIN	immediately	y by applying
5. FYE [Tax Year or Fiscal Yea	r End]:/			

Month / Day

A fiscal year (FY) is a period that a company or government uses for accounting purposes and preparing financial statements. For tax purposes, the Internal Revenue Service (IRS) allows companies to be either calendar-year taxpayers or fiscal-year taxpayers. Supply month and day for intended tax year end, e.g. 1/31, 2/28, 3/31, 4/30, 5/31, 6/30, 7/31, 8/31, 9/30, 10/31, 11/30 or 12/31.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Application for Registration of Name of Nonregistered Foreign Association			
	DSCB:15-209 (rev. 2/2017)			
Address				
City State Zip Code				
Return document by email to:	209			
	egistration expires on December 31 of each year ween October 1 and December 31.			
Fee: \$70				
Check one:	☐ Renewal of registration			
In compliance with the requirements of the applicable provisions of 15 Pa.C.S. § 209 (relating to registra name of nonregistered foreign association), the undersigned foreign association, hereby states that:				
1. The type of association is (check only one):				
	ship			
2. The full and proper name of the foreign association as region2A. If the name in 2 does not contain a required designator of Commonwealth, the alternate name under which the association	or if the name in 2 is not available for use in the			
3. The principal office address of the nonregistered foreign a				
Number and street City	State Zip			
IN TESTIMONY WHEREOF, the undersigned nonregistered Registration of Name to be signed by a duly authorized office, 20				
	Name of Nonregistered Foreign Association			
	•			
	Signature			
	Signature			
	Title			
	Tiue			

DSCB:15-209-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

Any nonregistered foreign association seeking to register an association name for a period of up to one year may file this form. Available names will be registered though December 31 of the year in which the registration is filed. Registrations may be renewed annually between October 1 and December 31 for the following calendar year. Initial registrations filed between October 1 and December 31 will expire on December 31 of the following calendar year.

A foreign association whose name registration is effective may register as a foreign association under the registered name or consent to the use of that name by another association.

Applicable Law

For registration of name of nonqualified foreign association, 15 Pa.C.S. § 209; for names, in general, 15 Pa.C.S. § 414 and §§ 201-209. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Association Name Requirements

Generally, the name of an association may not be the same as the name of another association which is already on the records of the Department of State. Depending on the type of association, certain designators must be used in the association name. The minimum requirements for association names can be found at 15 Pa.C.S. §§ 201-209. Provisions relating to foreign association names are at 15 Pa.C.S. § 206 and § 414.

Restricted word and/or approvals:

Association names may not contain words, phrases or abbreviations prohibited or restricted by statute or regulation, unless in compliance with the restriction, generally with the consent or approval of a government agency, board or commission. These may include certain professional and occupational boards or commissions of the Bureau of Professional and Occupational Affairs, the Department of

Education, the Department of Banking and Securities, the Insurance Department or the Public Utility Commission. There are also words and abbreviations that may be restricted, prohibited, or may be permitted in certain instances as provided in various federal statutes, Attorney General opinions and Bureau regulations.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name). If Consent cannot be obtained, the association may adopt, for the purpose of doing business in this Commonwealth, an alternate name as indicated in Instruction 2A.
 - (2) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

Indicate whether the application is an initial registration or whether the application is being renewed. Renewals must be submitted for filing between October 1 and December 31 for the following calendar year.

- 1. Select the type of association. Only one option may be selected. This field is required.
- 2. Give the exact name of the nonregistered foreign association in its jurisdiction of formation. This should include the exact spelling, punctuation and any identifier such as "Inc.," "LLC" or "Limited." Jurisdiction of Formation means the state or country of incorporation or domestic registration. For the purposes of this form, the jurisdiction of formation may not be Pennsylvania. This field is required.

2A. Alternate name:

A foreign association *must* register under its proper name under the laws of its jurisdiction of formation if that name satisfies the requirements of 15 Pa.C.S. §§ 201-209. If the proper name of the nonregistered foreign association is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa.C.S.

DSCB:15-209-Instructions

§§ 201-209 (relating to names), the foreign association must adopt an alternate name for use in Pennsylvania that complies with 15 Pa.C.S. §§ 201-209 and set forth the resulting name in Paragraph 2A.

An acceptable association identifier must be part of the association name. For foreign association name requirements, see 15 Pa.C.S. § 206, § 412 and § 414. Where the name of the foreign association does not comply with 15 Pa.C.S. §§ 201-209 (relating to names), the foreign association must adopt an alternate name that complies with 15 Pa.C.S. §§ 201-209 for use in Pennsylvania. If applicable, enter the name for use in Pennsylvania in 2A.

This field is required *only if* the name in field 2 is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa.C.S. §§ 201-209 (relating to names).

3. The street and mailing address of the association's principal office. This is the principal executive office of the association and need not be located in this Commonwealth. Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

Signature and Verification

An authorized representative of the unregistered foreign association must sign the Application for Registration of Name. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Foreign Registration Statement DSCB:15-412		
Name		(rev. 2/2017)		
Address				
City State	Zip Code			
Return document by email to:		2	412	
Read all instructions prior to comple	eting. This form may b	oe submitted online at https:/	//www.corporations.pa.gov/.	
Fee: \$250	y for a veteran/reservi	st-owned small business fee	exemption (see instructions)	
In compliance with the require registration statement), the undersigned			412 (relating to foreign	
1. The type of association is (check only	one):			
☐ Business Corporation ☐ Nonprofit Corporation ☐ Limited Liability Company	☐ Limited Partnersl ☐ Limited Liability ☐ Limited Liability	(General) Partnership	☐ Business Trust ☐ Professional Association	
2. The full and proper name of the foreign	gn association as regis	tered in its jurisdiction of fo	rmation is:	
2A. If the name in 2 does not contain a name under Commonwealth, the alternate name under				
3. The jurisdiction of formation is:				
4. The street and mailing address of the	association's principal	office.		
Number and street	City	State	Zip	
4A. The street and mailing address of th jurisdiction of formation in that jurisdict		ed to be maintained by the la	aw of the association's	
Number and street	City	State	Zip	

DSCB:15-412 - 2

Complete part (a) OR (c)	v) — noi voin.		
Number and street	City	State	Zip County
	OR		
(b) c/o: Name of Commercial	ial Registered Office Provider		County
6. Check one of the foll	owing:		
☐ The association m	nay not have series.		
☐ The association m	nay have one or more series.		
	istration of foreign association (check, and		- -
	stration Statement shall be effective upon	•	
☐ The Foreign Regi	stration Statement shall be effective on:	Date (MM/DD/YYYY)	at Hour (if any)
		,	• • • • • • • • • • • • • • • • • • • •
8. To be completed by I	Limited Liability Companies only. Check	, and if appropriate compl	ete, one of the following:
☐ The association is service(s).	a limited liability company which is not o	organized to render any of	the below professional
	a restricted professional limited liability of all service(s): (If this box is checked, one of		
Chiropractic Optometry Psychology	DentistryOsteopathic medicine and surgeryVeterinary medicine	LawPodiatric medicine	Medicine and surgeryPublic accounting
IN TESTIMONIV WHIE	REOF, the undersigned association has ca	avend this Formion Desistance	tion Chahamantha ha sismad
	entative thereof this day		
	-	Name of As	sociation
	-	Signati	ure
	-	Title	

DSCB:15-412-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$250. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Foreign Registration Statement form when submitted. For more information on the fee exemption, see Fees and Payments.

This form and all accompanying documents shall be mailed to the address stated above.

A foreign corporation (both business and nonprofit corporation) is required by 15 Pa.C.S. § 4124 or by 15 Pa.C.S. § 6124 (relating to advertisement) to advertise its intention to register or its registration to do business in Pennsylvania. Proofs of publication of such advertising should not be submitted to, and will not be filed in, the Department, but should be filed with the minutes of the corporation.

Who should file this form?

Foreign filing associations are corporations for profit, corporations not-for-profit, limited partnerships, limited liability companies, professional associations and business or statutory trusts that were not created or formed under the laws of Pennsylvania. Foreign filing associations and foreign limited liability partnerships desiring to do business in this Commonwealth must register with the Department of State by filing this form. A foreign filing association or foreign limited liability partnership may not do business in this Commonwealth until it registers with the Department. See 15 Pa.C.S. § 403 for activities that do not constitute doing business in this Commonwealth. It is up to the association to determine whether its activities require it to register with the Department of State.

Applicable Law

For foreign associations, in general, 15 Pa.C.S. §§ 102; 401-419; for registration statement, 15 Pa.C.S. § 412; for names, 15 Pa.C.S. § 414 and §§ 201-209. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Assocation Name Requirements

Generally, the name of an association may not be the same as the name of another association which is already on the records of the Department of State. Depending on the type of association, certain designators must be used in the association

name. The minimum requirements for association names can be found at 15 Pa.C.S. §§ 201-209. Provisions relating to foreign association names are at 15 Pa.C.S. § 206 and § 414.

Designators

Designators are the words or abbreviations used at the end of the association name which designate the type of association. Minimum designator requirements are:

<u>Business corporations</u> – The name of a domestic or registered foreign business corporation must contain:

- (1) the word "corporation," "company," "incorporated" or "limited" or an abbreviation of any of these terms;
- (2) the word "association," "fund" or "syndicate"; or
- (3) words or abbreviations of like import used in a jurisdiction other than this Commonwealth.

The name of a business corporation may not contain the term "limited liability company" or an abbreviation of that term.

Professional corporations – The provisions of § 203(a) (relating to requirements for business corporation names) shall not prohibit the use of a name of a professional corporation if the name contains and is restricted to the name or the last name of one or more of the present, prospective or former shareholders or of individuals who were associated with a predecessor or whose individual name or names appeared in the name of the predecessor. The name of a professional corporation may contain the term "Professional Corporation" or "P.C.," in place of a business corporation designator. The name of a professional corporation may contain the word "associates" but this is not considered an association designator.

Nonprofit corporations – The name of a domestic nonprofit corporation or registered foreign corporation not-for-profit may (but is not required to) contain:

- (1) the word "corporation," "company," "incorporated" or "limited" or an abbreviation of any of these terms;
- (2) the word "association," "fund" or "syndicate"; or
- (3) words or abbreviations of like import used in a jurisdiction other than this Commonwealth.

<u>Limited liability companies</u> – The name of a domestic limited liability company or registered foreign limited liability company must contain:

- (1) the term "company," "limited" or "limited liability company" or an abbreviation of one of those terms, or (2) words or abbreviations of like import used in a jurisdiction other than this Commonwealth.
- The name of a limited liability company may not contain any words implying that it is a business corporation, such as

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"corporation" or "incorporated" or an abbreviation of these terms.

<u>Limited liability partnerships</u> – The name of a domestic limited liability partnership or registered foreign limited liability partnership must contain:

(1) the term "company," "limited" or "limited liability partnership" or an abbreviation of one of those terms, or (2) words or abbreviations of like import used in a jurisdiction other than this Commonwealth.

<u>Limited partnerships</u> – The name of a domestic limited partnership or registered foreign limited partnership is not required to contain a word or abbreviation indicating that it is a limited partnership and may contain the name of a partner. *However*, if the limited partnership is a limited liability limited partnership, the name must contain:

(1) the term "company," "limited" or "limited liability limited partnership" or an abbreviation of one of those terms, or (2) words or abbreviations of like import.

<u>Business trusts</u> –The proper name of a domestic business trust or registered foreign business trust is not required to contain a word or abbreviation indicating that it is a business trust

Restricted word and/or approvals:

Association names may not contain words, phrases or abbreviations prohibited or restricted by statute or regulation, unless in compliance with the restriction, generally with the consent or approval of a government agency, board or commission. These may include certain professional and occupational boards or commissions of the Bureau of Professional and Occupational Affairs, the Department of Education, the Department of Banking and Securities, the Insurance Department or the Public Utility Commission. There are also words and abbreviations that may be restricted, prohibited, or may be permitted in certain instances as provided in various federal statutes, Attorney General opinions and Bureau regulations.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- One copy of a completed form DSCB: 15-134A (Docketing Statement) for foreign corporations, business trusts and limited liability companies only.
- (2) Any *necessary* copies of form DSCB: 19-17.2 (Consent to Appropriation of Name). If Consent cannot be obtained, the association may adopt, for the purpose of doing business in this Commonwealth, an alternate name as indicated in Instruction 2A.
- (3) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the

filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Select the type of association. Only one option may be selected. This field is required.
- 2. Give the exact name of the association in its jurisdiction of formation. This should include the exact spelling, punctuation and any identifier such as "Inc.," "LLC" or "Limited." Jurisdiction of Formation means the state or country of incorporation or domestic registration. For the purposes of this form, the jurisdiction of formation may not be Pennsylvania. This field is required.

2A. Alternate name:

A foreign association *must* register under its proper name under the laws of its jurisdiction of formation if that name satisfies the requirements of 15 Pa.C.S. §§ 201-209. If the proper name is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa. C.S. §§ 201-209 (relating to names), the foreign association must adopt an alternate name for use in Pennsylvania that complies with 15 Pa. C.S. §§ 201-209 and set forth the resulting name in Paragraph 2A.

An acceptable association identifier must be part of the association name. For foreign association name requirements, see 15 Pa.C.S. § 412 and § 414. Where the name of the foreign association does not comply with 15 Pa.C.S. §§ 201-209 (relating to names), the foreign association must adopt an alternate name that complies with 15 Pa.C.S. §§ 201-209 for use in Pennsylvania. If applicable, enter the name for use in Pennsylvania in 2A. A.

After registering to do business in this Commonwealth under an alternate name, a foreign association shall do business in this Commonwealth under any of the following:

- (1) The alternate name.
- (2) Its proper name under the law of its jurisdiction of formation, with the addition of the name of its jurisdiction of formation.
- (3) A name the foreign association is authorized to use under 54 Pa.C.S. Ch. 3 (relating to fictitious names).

If a foreign association adopts an alternate name in order to register to do business in Pennsylvania, the registered foreign association must use the alternate name in all subsequent documents delivered to the Department for filing.

Field 2A is required *only if* the name in field 2 is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa. C.S. §§ 201-209 (relating to names).

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- 3. "Jurisdiction of formation" means the jurisdiction, other than Pennsylvania, whose law includes the governing statute of the registering association. This field is required.
- **4.** The street and mailing address of the association's principal office. This address may, but need not be in the jurisdiction of formation. **This field is required.**
- **4A.** The street and mailing address of the association's office which is required to be maintained in the jurisdiction of formation. **This field is required only if the association is required to maintain an office in the association's jurisdiction of formation.** If the jurisdiction requires that an association have and maintain a registered office in that jurisdiction, such registered office address must be supplied in this field. If the registered office address is in care of a commercial registered office provider, the number and street of the commercial registered office provider should be provided.
- 5. This address must be in Pennsylvania. Give one of the following: the registered office address in the Commonwealth in (a) or the name of a Commercial Registered Office Provider (b) and the county of venue.

Listing a Commercial Registered Office Provider in lieu of providing a registered office address is an option for any association that does not have a physical location or mailing address in Pennsylvania. Prior to listing a Commercial Registered Office Provider address, the association should enter into a contract for the services of the Commercial Registered Office Provider.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

This field is required.

6. Check the appropriate statement as to whether or not the foreign association may have one or more series.

Associations of certain types are authorized by the law of some states to create series. Whether or not an association may have series is determined by the law of its jurisdiction of formation. Typically, the formation documents of a series association must specifically provide for one or more independent "series" or subsets, with members, managers, membership interests or assets that have separate rights, obligations and liabilities and business purposes from the general association. If series are properly created, a debt, obligation or liability associated with the property of a particular series is enforceable only against property of that series, and not against the property of the association generally or any other series thereof.

A series association formed under the laws of another jurisdiction will be treated as a single legal entity for

registration purposes. The foreign association itself, rather than the individual series, should register as the legal entity that is transacting business in Pennsylvania. If each or any series of the foreign association transacting business in Pennsylvania transacts business under a name other than the name of the registered foreign association, the foreign association must file an Application for Registration of Fictitious Name (DSCB:54-311). **This field is required.**

- 7. Any date specified as the effective date of the Foreign Registration Statement must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the delivery of the Foreign Registration Statement to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If neither option for an effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.
- 8. If the association is not a restricted professional limited liability company organized to render any of the identified professional services, the first box must be checked. If the association is a restricted professional limited liability company organized to render any of the identified professional services, the second box must be checked and the appropriate professional service(s) must be checked. A response to this field is required from limited liability companies only. All other associations should disregard this item.

Signature and Verification

An authorized representative of the foreign association must sign the Foreign Registration Statement. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		DSC	Foreign Registi CB:15-413 v. 2/2017)	ation
Address				
City State	Zip Code		//////////////////////////////////////	
Return document by email to:			415	
Read all instructions prior to completing.	This form may be	submitted online at https:	://www.corporati	ons.pa.gov/.
Fee: \$250				
In compliance with the requirement foreign registration statement), the undersign				amendment of
1. The name of the association under which is	t is registered to do	business in this Common	wealth is:	
☐ Nonprofit Corporation ☐	Limited Partnership	General) Partnership	☐ Business Tri☐ Professional	
3. The (a) address of the association's registed Office Provider and the county of venue is:	ered office in this C	Commonwealth or (b) name	e of its Commer	cial Registered
Complete part (a) OR (b) – not both:				
(a)Number and street	City	State	Zip	County
(b) c/o: Name of Commercial Registered Office Prov	ider			County
4. Effective date of amendment of foreign re ☐ The Amendment of Foreign Registration ☐ The Amendment of Foreign Registration	on shall be effective	e upon filing in the Depart e on:	tment of State.	
		Date (MM/DD/YY)	YY)	Hour (if any)

DSCB:15-413 - 2

5. Check, and if appropriate complete, one of the following: The association desires that its registration be amended to complete.	change or correct the following information:
☐ The amendment adopted by the association is set forth in fu	ull in Exhibit A attached hereto and made a part hereof.
If the amendment reflects a change in name for the association which do foreign association must adopt an alternate name that complies with 15	oes not comply with 15 Pa.C.S. § 414 and §§ 201-209, the Pa.C.S. §§ 201-209 for use in Pennsylvania.
IN TESTIMONY WHEREOF, the undersigned association has count to be signed by a duly authorized representative thereof this	aused this Amendment of Foreign Registration Statementday of
	Name of Association
	Signature
	Title

DSCB:15-413-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$250. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above

Who should file this form?

A foreign association that is registered to do business in this Commonwealth must deliver to the Department for filing an amendment to its foreign registration statement if there is a change in any of the following:

- (1) The name of the association.
- (2) The type of association, including, if it is a foreign limited partnership, whether the association became or ceased to be a foreign limited liability limited partnership.
 - (3) The association's jurisdiction of formation.
- (4) An address required by section 412(a)(4) (relating to foreign registration statement).
 - (5) Its registered office.
- (6) The authority of the association to have one or more series.

Applicable Law

For foreign associations, in general, 15 Pa.C.S. §§ 102; 401-419; for amendment, 15 Pa.C.S. § 413; for names, 15 Pa.C.S. § 414 and §§ 201-209. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) One copy of a completed form DSCB: 15-134B (Docketing Statement Changes).
- (2) Any *necessary* copies of form DSCB: 19-17.2 (Consent to Appropriation of Name). If Consent cannot be obtained, the association may adopt, for the purpose of doing business in this Commonwealth, an alternate name that complies with 15 Pa.C.S. § 414 and §§ 201-209.
 - (3) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the association as registered to do business in Pennsylvania and as on file with the Department of State. If a foreign association has adopted an alternate name in order to register to do business in Pennsylvania, the registered foreign association must use the alternate name in response to a requirement that a document delivered to the Department for filing state the name of the association. This field is required.
- 2. Select the type of association. Only one option may be selected. This field is required.
- 3. Give one of the following: the current registered office address in the Commonwealth in (a) or the name of a Commercial Registered Office Provider (b) and the county of venue, as on file with the Department of State at the time the amendment is submitted for filing.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

- 4. Any date specified as the effective date of the Amendment of Foreign Registration must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the delivery of the Amendment of Foreign Registration to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If neither option for an effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.
- 5. Supply the change(s) to the information previously supplied in the association's Foreign Registration Statement (DSCB:15-412). If the amendment reflects a change in name for the association which does not comply with 15 Pa.C.S. § 414 and 15 Pa.C.S. §§ 201-209, the foreign association must have consent to use the name or adopt an alternate name that complies 15 Pa.C.S. §§ 201-209 for use in Pennsylvania. This field is required.

Signature and Verification

An authorized representative of the foreign association must sign the Amendment of Foreign Registration. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects.

This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Transfer of Foreign Registration DSCB:15-418
Name	(rev. 2/2017)
Address	
City State Zip Code	
Return document by email to:	
Read all instructions prior to completing. This form may be	e submitted online at https://www.corporations.pa.gov/ .
Fee: \$70	
In compliance with the requirements of the applicable registration), the undersigned registered foreign association he	e provisions of 15 Pa.C.S. § 418 (relating to transfer of reby states that:
1. The name of the association under which it is registered to conversion is:	lo business in this Commonwealth and before the merger or
2. The type of association before the merger or conversion is (Business Corporation Limited Partnersl Nonprofit Corporation Limited Liability Limited Liability Company Limited Liability 3. The name of the association following the merger or conve	ip
3A. If the name in 3 does not contain a required designator of Commonwealth, the alternate name under which the association	
4. The type of association after the merger or conversion (chec ☐ Business Corporation ☐ Limited Partnersl ☐ Nonprofit Corporation ☐ Limited Liability ☐ Limited Liability	ip Business Trust (General) Partnership Professional Association
5. The jurisdiction of formation of the association after the me	erger or conversion is:

DSCB:15-418 - 2

If different than the information for the registered foreign association before the merger or conversion, all of the following information for the association after the merger or conversion: 6A. The street and mailing address of the association's principal office is: Zip State Number and street City 6B. The street and mailing address of the office, if any, required to be maintained by the law of the association's jurisdiction of formation in that jurisdiction is: State Zip Number and street City 7. The (a) address of the association's registered office in this Commonwealth or (b) name of its Commercial Registered Office Provider and the county of venue is: Complete part (a) **OR** (b) – not both: Number and street State Zip County OR Name of Commercial Registered Office Provider County 8. Effective date of transfer of foreign registration is (check, and if appropriate complete, one of the following): ☐ The Transfer of Foreign Registration shall be effective upon filing in the Department of State. ☐ The Transfer of Foreign Registration shall be effective on: ____ Date (MM/DD/YYYY)

Title

DSCB:15-418-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

web site: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

If a registered foreign association merges into a nonregistered foreign association or converts to a foreign association required to register with the Department of State to do business in this Commonwealth, the association shall deliver to the Department for filing an application for Transfer of Registration.

When an application for Transfer of Registration takes effect, the registration of the registered foreign association to do business in this Commonwealth is transferred without interruption to the association into which it has merged or to which it has been converted.

The purpose of this filing is to clarify the status of the registered foreign association in the public records of the Department of State. A Transfer of Registration has the two-fold effect of canceling the authority of the foreign association to do business in Pennsylvania while at the same time reregistering it as the new type of foreign association. If the reregistered foreign association subsequently wishes to terminate its registration to do business, it may do so under 15 Pa.C.S. § 419.

Applicable Law

For foreign associations, in general, 15 Pa.C.S. §§ 102; 401-419; for transfer of registration, 15 Pa.C.S. § 418; for names, 15 Pa.C.S. § 414 and §§ 201-209. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) One copy of a completed form DSCB: 15-134B (Docketing Statement Changes).
- (2) Any *necessary* copies of form DSCB: 19-17.2 (Consent to Appropriation of Name). If Consent cannot be obtained, the association may adopt, for the purpose of doing business in this Commonwealth, an alternate name that complies with 15 Pa.C.S. § 414 and §§ 201-209

(3) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the association as registered to do business in Pennsylvania and as on file with the Department of State. If a foreign association has adopted an alternate name in order to register to do business in Pennsylvania, the registered foreign association must use the alternate name in response to a requirement that a document delivered to the Department for filling state the name of the association. This field is required.
- 2. Select the type of association before the merger or conversion. Only one option may be selected. This field is required.
- 3. Give the exact name of the association in the jurisdiction of formation after the merger or conversion. This should include the exact spelling, punctuation and any identifier such as "Inc.," "LLC" or "Limited." Jurisdiction of formation means the state or country of incorporation or domestic registration following the merger or conversion. For the purposes of this form, the jurisdiction of formation may not be Pennsylvania. This field is required.

3A. Alternate name:

A foreign association *must* register under its proper name under the laws of its jurisdiction of formation if that name satisfies the requirements of 15 Pa.C.S. §§ 201-209. If the proper name is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa. C.S. §§ 201-209 (relating to names), the foreign association must have consent to use the name or may adopt an alternate name for use in Pennsylvania that complies with 15 Pa. C.S. §§ 201-209 and set forth the resulting name in Paragraph 3A. The consent from the other association must be attached.

An acceptable association identifier must be part of the association name. For foreign association name requirements, see 15 Pa.C.S. § 412 and § 414. Where the name of the foreign association does not comply with 15 Pa.C.S. §§ 201-209 (relating to names), the foreign association must adopt an alternate name that complies with 15 Pa.C.S. §§ 201-209 for

DSCB:15-418-Instructions

use in Pennsylvania. If applicable, enter the name for use in Pennsylvania in 3A.

After registering to do business in this Commonwealth under an alternate name, a foreign association shall do business in this Commonwealth under any of the following:

- (1) The alternate name.
- (2) Its proper name under the law of its jurisdiction of formation, with the addition of the name of its jurisdiction of formation.
- (3) A name the foreign association is authorized to use under 54 Pa.C.S. Ch. 3 (relating to fictitious names).

This field is required *only if* the name in field 3 is unavailable because it is not distinguishable on the records of the Department of State from a name already in use, reserved or registered or if the name does not comply with 15 Pa. C.S. §§ 201-209 (relating to names).

- **4.** Select the type of association after the merger or conversion. Only one option may be selected. **This field is required.**
- 5. "Jurisdiction of formation" means the jurisdiction, other than Pennsylvania, whose law includes the governing statute of the registering association. This field is required.
- 6A. The street and mailing address of the association's principal office in the jurisdiction of formation. This field is required *only if* different than the information for the registered foreign association before the merger or conversion.
- 6B. The street and mailing address, if applicable, of the association's office required in the jurisdiction of formation. This field is required only if the association is required to maintain an office in the association's jurisdiction of formation and only if different than the information for the registered foreign association before the merger or conversion.
- 7. This address must be in Pennsylvania. Give one of the following: the registered office address in the Commonwealth in (a) or the name of a Commercial Registered Office Provider (b) and the county of venue.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required *only if* different than the information for the registered foreign association before the merger or conversion.

8. Any date specified as the effective date of the Transfer of Registration must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the delivery of the Transfer of Registration to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If

neither option for an effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. **This field is required.**

Signature and Verification

An authorized representative of the surviving or converted foreign association must sign the Transfer of Registration. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Articles of Incorporation - For Profit DSCB:15-1306/2102/2303/2702/2903/3101/3303/7102
Name	(rev. 2/2017)
Address	
City State Zip Co	ode
Return document by email to:	01236
Read all instructions prior to completing. This form	may be submitted online at https://www.corporations.pa.gov/ .
Fee: \$125	reservist-owned small business fee exemption (see instructions)
Check only one: Business-stock (§ 1306) Business-nonstock (§ 2102) Business-statutory close (§ 2303)	
In compliance with the requirements of the ap associations), the undersigned, desiring to incorporate a	plicable provisions (relating to corporations and unincorporated corporation for profit, hereby states that:
"company," or any abbreviation thereof. "Profecorporations): 2. Complete part (a) or (b) – not both:	ator required, i.e., "corporation," "incorporated," "limited," ssional corporation" or "P.C." permitted for professional
(a) The address of this corporation's proposed re (post office box alone is not acceptable)	gistered office in this Commonwealth is:
Number and Street City	State Zip County
	registered office provider and the county of venue is:
c/o: Name of Commercial Registered Office Provider	County
3. The corporation is incorporated under the prov	visions of the Business Corporation Law of 1988.
4. Check and complete one: The corporation is organized on a nonstock The corporation is organized on a stock sha	basis. re basis and the aggregate number of shares authorized is:

DSCB:15-1306/2102/2303/2702/2903/3101/3303/7102 - 2

5. The name and add sign below):	dress, including number and str	reet, if any, of each incorporator (all incorporators must
Name	Address	
6. The specified futu	ure effective date, if any:mo	onth/day/year hour, if any
7. Additional provis	sions of the articles, if any, atta	ach an 8½ by 11 sheet.
any of its shares	orporation only: Neither the conformal of any class that would constit U.S.C. § 77a et seq.)	corporation nor any shareholder shall make an offering of tute a "public offering" within the meaning of the Securities
members is: The corporat	ete one: tion is a cooperative corporatio	on and the common bond of membership among its on and the common bond of membership among its
Strike out if inapplic		nall have the purpose of creating general public benefit.
		IN TESTIMONY WHEREOF, the incorporator(s) has/have signed these Articles of Incorporation this
		, day of,
		Signature
		Signature
		Signature

DSCB:15-15-1306/2102/2303/2702/2903/3101/3303/7102 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057 Website: www.dos.pa.gov/corps

Instructions for Completion of Form (Articles of Incorporation-For Profit):

- A. Typewritten is preferred. If handwritten, the form shall be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$125 made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Articles of Incorporation form when submitted. For more information on the fee exemption, see Fees and Payments.
 - Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
 - (1) One copy of a completed form DSCB:15-134A (Docketing Statement).
 - (2) Any necessary copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (3) Any necessary governmental approvals.
- D. For general instructions relating to the incorporation of business corporations see 19 Pa. Code Ch. 23 (relating to business corporations generally). These instructions relate to such matters as corporate name, stated purposes, term of existence, nonstock status, authorized share structure and related authority of the board of directors, par values, inclusion of names of first directors in the Articles of Incorporation, optional provisions on cumulative voting for election of directors, etc.
- E. For required provisions in the Articles of a nonstock corporation, see 15 Pa.C.S. §§ 2102-2103 (relating to formation of nonstock corporations and contents of articles).
- F. For required provisions in the Articles of a statutory close corporation, see 15 Pa.C.S. § 2304 (relating to additional contents of articles of statutory close corporations).
- G. For required provisions in the Articles of a management corporation, see 15 Pa.C.S. § 2703 (relating to additional contents of articles of management corporations).
- H. For restrictions on the stated purposes of professional corporations, see 15 Pa.C.S. § 2903 (relating to formation of professional corporations).
- I. For required provisions on the stated purposes of benefit corporations, see 15 Pa.C.S. § 3311 (relating to corporate purposes).
- J. Articles for a nonprofit cooperative corporation should be filed on Form DSCB:15-5306/7102B (Articles of Incorporation Nonprofit).
- K. One or more corporations or natural persons of full age may incorporate a business corporation.
- L. 15 Pa.C.S. § 1307 (relating to advertisement) requires that the incorporators shall advertise their intention to file or the corporation shall advertise the filing of articles of incorporation. Proofs of publication of such advertising should not be submitted to, and will not be received by or filed in, the Department, but should be filed with the minutes of the corporation.
- M. This form and all accompanying documents shall be mailed to the address stated above.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Change of Registered Office
Name	_ DSCB:15-1507/5507/8625/8825 (rev. 2/2017)
Address	- 111111 1111
City State Zip Code	-
Return document by email to:	15076
Read all instructions prior to completing. This form ma	y be submitted online at https://www.corporations.pa.gov/ .
Fee: \$5 The type of domestic association (check only o	ne):
☐ Business Corporation ☐ Limited Liabi ☐ Nonprofit Corporation ☐ Limited Partn	
In compliance with the requirements of the applicable provi change of registered office), the undersigned domestic corp limited liability limited partnership, desiring to effect a char	oration, limited liability company, limited partnership or ge of registered office, hereby states that:
1. The name of the association is:	
 The current registered office address as on file with the I (a) 	Department of State. Complete part (a) OR (b) – not both:
(a) Number and street City	State Zip County
(b) c/o: Name of Commercial Registered Office Provider	County
3. New address. Complete part (a) OR (b) – not both:	
(a) The address in this Commonwealth to which the regisliability limited partnership or limited liability company	tered office of the corporation, limited partnership, limited s to be changed is:
Number and street City	State Zip County
partnership or limited liability company shall be provide	ership, limited liability partnership, limited liability limited l by:
c/o:Name of Commercial Registered Office Provider	County
4. For corporations only: Such change was authorized by t	ne Board of Directors of the corporation.
IN TESTIMONY WHEREOF, the undersigned has caused be signed by a duly authorized officer, general partner, men, 20	his Statement or Certificate of Change of Registered Office to ber or manager thereof this day of
<u>_</u>	
	Name of Corporation/Limited Partnership/ Limited Liability Limited Partnership/Limited Liability Company
	Signature
_	Title

DSCB:15-1507/5507/8625/8825 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057 Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$5.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

Every domestic corporation, limited liability company, limited partnership and limited liability limited partnership shall have and continuously maintain in this Commonwealth a registered office. Before a change of location of registered office becomes effective, the association either shall amend its organic record to reflect the change in location or shall file in the Department of State a statement of change of registered office executed by the association.

This form may be used by a domestic limited partnership which has registered as a limited liability limited partnership pursuant to 15 Pa.C.S. § 8201. A domestic general partnership which has registered as a limited liability partnership pursuant to 15 Pa.C.S. § 8201 must use form DSCB:15-8201B (Domestic Registered Limited Liability Partnership - Statement of Amendment) to amend the address of its principal place of business. A business trust may change its registered office location by an amendment of the trust instrument. See 15 Pa.C.S. § 9504.

This form may not be used by a foreign corporation, foreign limited liability company, foreign limited partnership or foreign limited liability partnership to change its registered office address. A foreign association that desires to reflect a change in address of registered office, change of name or other arrangements or facts that have changed must amend its foreign registration statement by filing form DSCB 15-413 (Amendment of Foreign Registration).

Applicable Law

For registered office requirements, in general, see 15 Pa.C.S. §§ 1507/5507/8625/8825. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Definitions

A **registered office** is an office maintained by a domestic filing association or registered foreign association in this Commonwealth as required by section 1507 (relating to registered office). A domestic filing association or registered

foreign association shall have and continuously maintain in this Commonwealth a registered office which may, but need not, be the same as its place of business.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the association. The name on this line must match exactly the association name as shown in Department's records at the time the Statement/Certificate of Change of Registered Office is submitted for filing. This field is required.
- 2. Current address. The address provided must be the association's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Statement/Certificate of Change of Registered Office is submitted for filing. This field is required.
- 3. New address. The address provided should be the association's new registered office address (a) or Commercial Registered Office Provider (b) after the Statement/Certificate of Change of Registered Office is filed and effective.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

4. For business and nonprofit corporations only, a statement must be made that the change was authorized by the board of directors or other body. If the change in registered office was authorized by a body other than the board of directors of the corporation, paragraph 4 should be modified accordingly.

Signature and Verification

An authorized representative of the association must sign the Statement/Certificate of Change of Registered Office. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

☐ Return document by mail to:	Voluntary Dissolution [Never Transacted Business] Domestic Corporation
Name	DSCB 15-1971/5971 (rev. 2/2017)
Address City State Zip Code	
Return document by email to:	19/1
Read all instructions prior to completing. This form may b	e submitted online at https://www.corporations.pa.gov/ .
Fee: \$70	
Check one: By Shareholders or Incorporators - Do	
In compliance with the requirements of the applicable p voluntary dissolution by shareholders, incorporators or member undersigned, desiring that the corporation should be dissolved,	ers for a corporation that has never transacted business), the
1. The name of the corporation is:	
2. The current registered office address of the corporation as a Complete part (a) OR (b) – not both:	on file with the Department of State.
(a)	State Zip County
·	State Zip County
(a)	State Zip County County
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated:	County
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated:	County
(b) c/o:Name of Commercial Registered Office Provider	County
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated:	County
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated: (MM/DD/YYYY) 5. Check one of the following: Business Corporation Only: The corporation has never	County transacted business or held assets other than money
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated: (MM/DD/YYYY) 5. Check one of the following: Business Corporation Only: The corporation has never received from subscriptions for shares. Nonprofit Corporation Only: The corporation has not received.	transacted business or held assets other than money ecceived any property in trust or otherwise commenced e shares or memberships, less any part thereof disbursed for
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated: (MM/DD/YYYY) 5. Check one of the following: Business Corporation Only: The corporation has never received from subscriptions for shares. Nonprofit Corporation Only: The corporation has not rebusiness. 6. The amount, if any, actually paid in on subscriptions for its	transacted business or held assets other than money ecceived any property in trust or otherwise commenced e shares or memberships, less any part thereof disbursed for
(b) c/o: Name of Commercial Registered Office Provider 3. The statute by or under which it was incorporated: (MM/DD/YYYY) 5. Check one of the following: Business Corporation Only: The corporation has never received from subscriptions for shares. Nonprofit Corporation Only: The corporation has not rebusiness. 6. The amount, if any, actually paid in on subscriptions for its necessary expenses, has been returned to those entitled the	transacted business or held assets other than money ecceived any property in trust or otherwise commenced e shares or memberships, less any part thereof disbursed for

DSCB:15-1971/5971-2

8.	Business Corporation Only: Check one of the following:
	☐ A majority of the incorporators elect that the corporation be dissolved.
	☐ A majority in interest of the shareholders elect that the corporation be dissolved.
9.	Nonprofit Corporation Only:
	☐ A majority of the members or incorporators elect that the corporation be dissolved.
ab	TESTIMONY WHEREOF, at least a majority of the incorporators or a majority in interest of the shareholders of the ove-named business corporation or at least a majority of the members or incorporators of the above-named nonprofit rporation has hereunto set their hands this day of,
	Signature
	Signature
	Signature

DSCB:15-1971/5971 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70, made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used to dissolve a domestic business corporation that has never transacted business or has never held assets other than money received from subscriptions for shares. This form may also be used to dissolve a domestic nonprofit corporation that has not received any property in trust or otherwise commenced business.

If a domestic business or nonprofit corporation has transacted business, it must use form DSCB:15-1977/5977 (Articles of Dissolution - Domestic Corporation) to dissolve the corporation.

Applicable Law

For dissolution and winding up requirements for business corporations, in general, see 15 Pa.C.S. §§ 1971-1979. For dissolution and winding up requirements for nonprofit corporations, in general, see 15 Pa.C.S. §§ 5971-5979. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

1. Name. Give the exact name of the corporation. The name on this line must match exactly the association name as shown in Department's records at the time the Voluntary Dissolution (Never Transacted Business) is

submitted for filing. This field is required.

- 2. Address. The address provided must be the association's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Voluntary Dissolution (Never Transacted Business) is submitted for filing. This field is required.
- 3. The statute by or under which it was incorporated, i.e. the Business Corporation Law of 1988, the Nonprofit Corporation Law of 1988. This field is required.
- 4. Give the date of incorporation (month, day and year). This field is required.
- **5.** Check one option based on whether corporation is a business corporation or a nonprofit corporation. **This field is required.**
- 6. Mandatory statement. This field is required.
- 7. Check the appropriate box. A response to this field is required.
- **8.** A response to this field is required for business corporations only. Nonprofit corporations answer field 9.
- 9. A response to this field is required for nonprofit corporations only. Business corporations answer field 8.

Signature and Verification

The Voluntary Dissolution [Never Transacted Business] must be executed by a majority of the incorporators or a majority in interest of the shareholders or members. When the corporation has more than three executing incorporators or shareholders (business) or three executing incorporators or members (nonprofit), additional signature lines should be added as appropriate. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Attachments

The following, in addition to the filing fee, shall accompany this form:

(1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Annual Benefit Report Benefit Corporation
Name	DSCB:15-3331 (rev. 2/2017)
Address	.
City State Zip Code	
Return document by email to:	3331
Read all instructions prior to completing. This form may	be submitted online at https://www.corporations.pa.gov/ .
Fee: \$70	
In compliance with the requirements of 15 Pa.C.S. benefit corporation hereby states that:	§ 3331 (relating to annual benefit report), the undersigned
1. The name of the corporation is:	
2. Complete part (a) or (b) – not both:(a) The address of this corporation's current registered	ed office in this Commonwealth is
Number and Street City	State Zip County
(b) The name of this corporation's commercial regist	•
c/o: Name of Commercial Registered Office Provider	r County
 A narrative description of: (i) the ways in which the benefit corporation pursue which general public benefit was created; 	ed general public benefit during the year and the extent to
	ed any specific public benefit that the articles state is the extent to which that specific public benefit was created;
(iii) any circumstances that have hindered the creat benefit; and	ion by the benefit corporation of general or specific public
(iv) the process and rationale for selecting or change	ing the third-party standard used to prepare the benefit report.

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DC.	CD.	15	22	21	1 - 2

1.	An assessment of the overall social and environmental performance of the benefit corporation against a third-party standard applied consistently with any application of that standard in prior benefit reports or accompanied by an explanation of the reasons for any inconsistent application.
5.	The name of the benefit director and the benefit officer, if any, and the address to which correspondence to each of them may be directed.
6.	The compensation paid by the benefit corporation during the year to each director in that capacity.
7.	The annual compliance statement of the benefit director described in section 3322(c) (relating to benefit director). Check applicable statements and strikeout inapplicable statements.
	☐ In the opinion of the benefit director, the benefit corporation acted in accordance with its general and any specific public benefit purpose in all material respects during the period covered by this report.
	☐ In the opinion of the benefit director, the directors and officers complied with sections 3321(a) (relating to standard of conduct for directors) and 3323(a) (relating to standard of conduct for officers), respectively.
	☐ In the opinion of the benefit director, the benefit corporation or its directors or officers failed so to act. Following is a description of the ways in which the benefit corporation or its directors or officers failed so to act:
8.	A statement of any connection between the organization that established the third-party standard, or its directors, officers or any holder of 5% or more of the governance interests in the organization, and the benefit corporation or its directors, officers or any holder of 5% or more of the outstanding shares of the benefit corporation, including any financial or governance relationship which might materially affect the credibility of the use of the third-party standard.
	TESTIMONY WHEREOF, the undersigned registrant has caused this Annual Benefit Report to be signed by a ly authorized officer this day of, 20
	Name of Corporation
	Signature
	Title

DSCB:15-3331 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

Every domestic benefit corporation must deliver to each shareholder an annual benefit report. Concurrently with the delivery of the benefit report to shareholders, the benefit corporation must deliver a copy of the benefit report to the Department of State for filing

Applicable Law

For annual benefit report requirements, see 15 Pa.C.S. § 3331. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Definitions

A benefit corporation is a business corporation that has elected to become subject to Chapter 33 of the Business Corporation Law and whose status as a benefit corporation has not been terminated. A benefit corporation shall have a purpose of creating general public benefit. This purpose is in addition to its purpose under 15 Pa.C.S. § 1301 (relating to purposes). The articles of a benefit corporation may identify one or more specific public benefits that it is the purpose of the benefit corporation to create.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the association. The name on this line must match exactly the association name as shown in Department's records at the time the Annual Benefit Report is submitted for filing. This field is required.
- 2. Current address. The address provided must be the association's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Annual Benefit Report is submitted for filing. This field is required.
- **3 8.** See 15 Pa.C.S. § 3331 for more information. Additional pages may be attached as needed.

A benefit corporation may change from year to year the standard it uses for assessing its performance. But if a benefit corporation uses the same standard for assessing its performance in more than one year, the standard must either be applied consistently or the benefit corporation must provide an explanation of the reasons for any inconsistent use of the standard.

Fields 3-8 are required with the exception that the information in field 6 (relating to compensation paid to directors) and any financial or proprietary information may be omitted from the benefit report as filed with the Department of

Signature and Verification

An authorized representative of the association must sign the Annual Benefit Report. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	
	Articles of Incorporation - Nonprofit DSCB:15-5306/7102
Name	(rev. 2/2017)
Address	1 1819 1 1818 1818 1818 1811 1811
City State Zip Code	
☐ Return document by email to:	5306
Read all instructions prior to completing. This form may be	be submitted online at https://www.corporations.pa.gov
	ed small business fee exemption (see instructions)
Check one: Domestic Nonprofit Corporation (§ 5	
•	
In compliance with the requirements of the applicable cooperative corporations generally), the undersigned, desiring corporation, hereby state(s) that:	to incorporate a nonprofit/nonprofit cooperative
1. The name of the corporation is:	
 2. Complete part (a) or (b) – not both: (a) The address of this corporation's current registered (post office box alone is not acceptable) 	office in this Commonwealth is:
Number and Street City	State Zip County
(b) The name of this corporation's commercial registe	red office provider and the county of venue is:
c/o:	
Name of Commercial Registered Office Provider	County
The corporation is incorporated under the Nonprofit purpose or purposes.	Corporation Law of 1988 for the following
4. The corporation does not contemplate pecuniary gain	n or profit, incidental or otherwise.
5. Check and complete one: The corporation is organism The corporation is organism number of shares authors.	inized on a stock share basis and the aggregate

DSCB:15-5306/7102-2

The incorporators constitute a majority	as a nonprofit corporation only. Check if applicable: of the members of the committee authorized to uisite vote required by the organic law of the organic law.
7. For Nonprofit Corporation Only: Check one: The corporation shall have The corporation shall have	
8. For Nonprofit Cooperative Corporation Only:	
members is:	ion and the common bond of membership among its ion and the common bond of membership among its
0. The name(s) and address(ss) of each incorpor	ator(s) is (are) (all incorporators must sign below):
Name(s)	Address(es)
10. The specified effective date, if any, is: month day year hour, if any	
11. Additional provisions of the articles, if any, a	attach an 8½ x 11 sheet.
	IN TESTIMONY WHEREOF, the incorporator(s) has/have signed these Articles of Incorporation this day of
	Signature
	Signature
	Signature

DSCB:15-5306/7102 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057 Website: www.dos.pa.gov/corps

Instructions for Completion of Form – (Articles of Incorporation–Nonprofit):

A. Typewritten is preferred. If handwritten, the form shall be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$125 made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Articles of Incorporation form when submitted. For more information on the fee exemption, see <u>Fees and Payments</u>.

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
 - (1) One copy of a completed form DSCB:15-134A (Docketing Statement).
 - (2) Any necessary copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (3) Any necessary governmental approvals.
- D. For Domestic Nonprofit Corporation Only: For general instructions relating to the incorporation of nonprofit corporations see 19 Pa. Code Ch. 41 (relating to nonprofit corporations generally). These instructions relate to such matters as corporate name, stated purposes, term of existence, authorized share structure, inclusion of names of first directors in the Articles of Incorporation, provisions on incorporation of unincorporated associations, etc.
- E. For Nonprofit Cooperative Corporation Only: For general instructions relating to the incorporation of cooperative corporations see 19 Pa. Code Ch. 51 (relating to cooperative corporations). Under 15 Pa.C.S. § 7103 (relating to use of term "cooperative" in corporate name) the corporate name in Paragraph 1 must, unless otherwise provided by statute, contain one of the terms "cooperative" or "coop." See 19 Pa. Code § 17.7 (relating to cooperative names). See also the general instructions relating to the incorporation of nonprofit corporations, 19 Pa. Code Ch. 41 (relating to nonprofit corporations generally). These instructions relate to such matters as corporate name, stated purposes, term of existence, authorized share structure, inclusion of names of first directors in the Articles of Incorporation, provisions on incorporation of unincorporated associations, etc.
 - Under 15 Pa.C.S. § 7102(a) the articles of the corporation must set forth a common bond of membership among its members or shareholders by reason of occupation, residence or otherwise.
- F. One or more corporations or natural persons of full age may incorporate a nonprofit/nonprofit cooperative corporation.
- G. Per 15 Pa.C.S. § 5307 (relating to advertisement), the incorporators shall advertise their intention to file or the corporation shall advertise the filing of articles of incorporation. Proofs of publication of such advertising should not be submitted to, and will not be received by or filed in, the Department, but should be filed with the minutes of the corporation.
- H. This form and all accompanying documents shall be mailed to the address stated above.

DSCB:15-5306/7102 - Instructions

NONPROFIT CORPORATIONS ONLY

Pursuant to 15 Pa.C.S. § 5110, a nonprofit corporation is required to annually notify the Department of State of any change of its officers. If no change of officers has occurred since the last report, the report need not be filed. These annual reports are submitted on form DSCB:15-5110 (Annual Statement-Nonprofit Corporation). No fee is required for this filing.

Please forward annual report to the Department of State, Bureau of Corporations and Charitable Organizations, P.O. Box 8722, Harrisburg, PA 17105-8722.

ADDITIONAL INFORMATION REGARDING NONPROFIT CORPORATIONS

Nonprofit corporations that solicit funds from citizens of the Commonwealth of Pennsylvania must register with the Bureau of Corporations and Charitable Organizations of the Department of State, unless exempt from registration requirements. Please contact the Bureau of Corporations and Charitable Organizations at 207 North Office Building, Harrisburg, PA 17120, (717) 783-1720 or 1-800-732-0999 within Pennsylvania, for more information on registration.

Pennsylvania sales tax exempt status may be obtained from the Department of Revenue, Registration Division, Exemption Unit, Department 280901, Harrisburg, PA 17128-0901. Any other type of exempt status may be obtained or explained by contacting your local Federal Internal Revenue Service.

Please be advised that the date and signature of the Secretary of the Commonwealth indicate the filing in the Department of State. NO CERTIFICATE OF INCORPORATION IS ISSUED for nonprofit corporations.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

☐ Return document by mail to:		State	ement of Reg	istration
		Domestic L	imited Liabil	ity Partnership
Name		DSCB:	15-8201A (re	ev. 2/2017)
Address				
City 'State	Zip Code		0204	
Return document by email to:			0201	entrope and the second
	Read all instructions pr	ior to completing.		
Fee: $$125$	eteran/reservist-owned	small business fee ex	emption (see	instructions)
In compliance with the requiren general partnership or limited partnersh limited partnership, hereby certifies that	ip, desiring to register as			
1. The name of the domestic limited lia i.e., "company," "limited" or "limit			oartnership is	(designator is required
2. Check and complete one of the follow. The partnership is a general partnership.		including number and	d street, if an	y, of its principal place
of business is:				
	City	State	Zip	County
of business is:	nership and the (a) addre	ess of its current regis	tered office i	n this Commonwealth
of business is: Number and street The partnership is a limited partnership is a limited partnership.	nership and the (a) addre	ess of its current regis	tered office i	n this Commonwealth
of business is: Number and street The partnership is a limited partner or (b) name of its commercial region.	nership and the (a) addre	ess of its current regis and the county of ven	tered office in the is: (Comp	n this Commonwealth olete (a) or (b), not both
of business is: Number and street The partnership is a limited partner or (b) name of its commercial regression. (a) Number and Street	nership and the (a) addre gistered office provider City	ess of its current regis and the county of ven	tered office in the is: (Comp	n this Commonwealth olete (a) or (b), not both County
of business is: Number and street The partnership is a limited partner or (b) name of its commercial recommercial recomm	nership and the (a) addregistered office provider City Tice Provider	ess of its current registand the county of ven	tered office in the is: (Composite Zip	n this Commonwealth olete (a) or (b), not both County
of business is: Number and street The partnership is a limited partner or (b) name of its commercial recommercial recommercial recommercial Street (a) Number and Street c/o: (b) Name of Commercial Registered Of	nership and the (a) addregistered office provider City Tice Provider plicable term) partnershi	ess of its current registand the county of ven State p registers under 15 I	Zip Count	n this Commonwealth olete (a) or (b), not both County
Of business is: Number and street The partnership is a limited partner or (b) name of its commercial regression. (a) Number and Street c/o: (b)Name of Commercial Registered Of 3. The general/limited (strike out inapp	nership and the (a) addregistered office provider City Tice Provider plicable term) partnershi	State p registers under 15 I interest of the partne	Zip County Pa.C.S. Chap	County Y ter 82 Subchapter A.
Number and street The partnership is a limited partner or (b) name of its commercial recommercial recommercial recommercial Registered Of the general/limited (strike out inapped). The registration has been authorized	nership and the (a) addregistered office provider City Tice Provider plicable term) partnershi by at least a majority in tration (check, and if ap	State State p registers under 15 F interest of the partne	Zip Count Pa.C.S. Chap rs.	County Y ter 82 Subchapter A.
of business is: Number and street ☐ The partnership is a limited partnor (b) name of its commercial regression. (a) Number and Street c/o: (b)Name of Commercial Registered Of 3. The general/limited (strike out inapple). 4. The registration has been authorized. 5. Effective date of Statement of Registers.	nership and the (a) addregistered office provider City Tice Provider plicable term) partnershi by at least a majority in tration (check, and if appall be effective upon filing	State State p registers under 15 I interest of the partne propriate complete, or in the Department	Zip County Pa.C.S. Chappers. ne of the folloof State.	County Y ter 82 Subchapter A. owing):
of business is: Number and street ☐ The partnership is a limited partnor (b) name of its commercial regression. (a) Number and Street c/o: (b)Name of Commercial Registered Of 3. The general/limited (strike out inapple). 4. The registration has been authorized. 5. Effective date of Statement of Registation shall.	City Tice Provider plicable term) partnershi by at least a majority in tration (check, and if appending the distriction of the content of	State State State Pregisters under 15 H interest of the partne propriate complete, or ng in the Department Date (MM/DD/YYYY) of the domestic limite	Zip County Pa.C.S. Chap rs. ne of the follof Stateated liability parts.	conty County Y ter 82 Subchapter A. Owing): Hour (if any) artnership/limited
Number and street The partnership is a limited partner or (b) name of its commercial regression (a) Number and Street c/o: (b)Name of Commercial Registered Of The general/limited (strike out inapped). The registration has been authorized Effective date of Statement of Registration shall The Statement of Registrat	City Tice Provider plicable term) partnershi by at least a majority in tration (check, and if appending the distriction of the content of	State State State Pregisters under 15 H interest of the partne propriate complete, or ng in the Department Date (MM/DD/YYYY) of the domestic limite	Zip County Pa.C.S. Chap rs. ne of the follof Stateated liability parts.	conty County Y ter 82 Subchapter A. Owing): Hour (if any) artnership/limited
Number and street The partnership is a limited partnor (b) name of its commercial regression (a) Number and Street c/o: (b)Name of Commercial Registered Of The general/limited (strike out inapped) The registration has been authorized Effective date of Statement of Registration shall The Statement of Registration	City Tice Provider plicable term) partnershi by at least a majority in tration (check, and if appending the distriction of the content of	State State State Pregisters under 15 H interest of the partne propriate complete, or ng in the Department Date (MM/DD/YYYY) of the domestic limite	County Pa.C.S. Chap rs. ne of the follof State. at ed liability particular and	conty County Y ter 82 Subchapter A. Owing): Hour (if any) artnership/limited

Title

DSCB:15-8201A-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$125. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Statement of Registration form when submitted. For more information on the fee exemption, see Fees and Payments.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

The status of being a limited liability partnership is available for either general partnerships or limited partnerships. In the case of a limited partnership, the limited partners already enjoy limited liability, but registering will provide limited liability for the general partners.

For a general partnership registering as a limited liability partnership, prior registration with the Department of State as a general partnership is not required. For a limited partnership registering as a limited liability limited partnership, the limited partnership must be an existing limited partnership filed with Department of State in order to use this form.

Registration under 15 Pa.C.S. § 8201 does not change the basic form of organization of the registering partnership as either a general or limited partnership.

Applicable Law

For requirements on limited liability partnerships and limited liability limited partnerships, see 15 Pa.C.S. §§ 8201-8244. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Definitions

A limited liability partnership is a domestic or foreign general partnership for which there is in effect:

- (1) a statement of registration under Chapter 82 (relating to limited liability partnerships and limited liability limited partnerships); or
- (2) a similar filing under the organic law of a foreign general partnership.

A limited liability limited partnership is a domestic or foreign limited partnership for which there is in effect:

- (1) a statement of registration under Chapter 82;
- (2) a provision of its certificate of limited partnership electing to be subject to Chapter 82; or
- (3) a similar filing or provision under the organic law of a foreign partnership.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability partnership or limited liability limited partnership. The proper name of a domestic limited liability partnership must contain the term "company," "limited" or "limited liability partnership," or an abbreviation of one of those terms. This field is required.
- 2. Address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. For a general partnership, the address of the principal place of business should be set forth in the first part of Field 2. For a limited partnership, the registered office address should be set forth in the second part of Field 2. The registered office address may be a number and street address or the name of a Commercial Registered Office Provider. This field is required.
- 3. The statement in this field is required.
- 4. The statement in this field is required.
- 5. Any date specified as the effective date of the Statement of Registration must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the delivery of the Statement of Registration to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If neither option for an effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.

Signature and Verification

This form must be signed by a general partner. Any natural

person of full age, corporation, partnership, limited liability company, business trust, other association, government entity (other than the Commonwealth), estate, trust or foundation may be designated as a general partner in the general partnership or limited partnership which is registering and may execute this form. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (2) Any necessary governmental approvals.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:					ent/Termination lity Partnership	
Name			DSCB:15-	8201B/8201	C (rev. 2/2017)	
Address						
City	State	Zip Code		82011 D		
Return document by email to:				020111		
	Rea	d all instructions	prior to completing.			
Fee: \$70						
		nendment (§ 820 rmination (§ 820				
In compliance with the termination), the undersigned domestic limited liability limit	desiring to ame ed partnership	end/terminate its , hereby certifies	registration as a domes that:	tic limited lia	ibility partnership or	
1. The name of the domestic l	imited liability	partnership or li	mited liability limited p	oartnership is	:	
2. Check and complete one of The partnership is a general of business is:			ss, including number an	d street, if an	y, of its principal plac	e
of business is.						
Number and street		City	State	Zip	County	
☐ The partnership is a lin or (b) name of its comr	nited partnershi nercial register	ip and the (a) addred office provide	dress of its current regiser and the county of ver	tered office inue is: (Comp	n this Commonwealth blete (a) or (b), not bot	h)
(a) Number and Street		City	State	Zip	County	_
c/o:						
(b)Name of Commercial Reg	gistered Office P	rovider		Count	y	

Complete 3-4 for Statement of Amendment Only:

- 3. The amendment authorized by the partnership is set forth in full in the restated Statement of Registration, attached hereto as an exhibit. The attached restated Statement of Registration supersedes the original Statement of Registration and all previous amendments thereto.
- **4.** The amendment has been authorized by at least a majority in interest of the partners.

DSCB:15-8201B/8201C-2

Complete 5-6 for Statement of Termination Only:

- 5. The registration of the partnership under the provisions of 15 Pa.C.S. § 8201 (relating to statement of termination) is hereby terminated.
- **6.** The termination has been authorized by all of the general partners.

7.	Effective date of amendment or termination of regis The Statement of Amendment/Termination shall	ll be effective upor	n filing in the Department	of State.
	☐ The Statement of Amendment/Termination shall	ll be effective on:		at .
	☐ The Statement of Amendment/Termination shall	•	Date (MM/DD/YYYY)	Hour (if any)
		of the domestic l limited partnersh Amendment/Terr	Y WHEREOF, the unders imited liability partnership ip has executed this State mination this	p/limited liability ment of
		Name		
		Signature		

Title

DSCB:15-8201B/8201C-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

A general partnership registered as a limited liability partnership or a limited partnership registered as a limited liability limited partnership may file a Statement of Amendment/Termination to amend its registration or terminate its status as a limited liability partnership.

Applicable Law

For requirements on limited liability partnerships and limited liability limited partnerships, see 15 Pa.C.S. §§ 8201-8244. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Definitions

A **limited liability partnership** is a domestic or foreign general partnership for which there is in effect:

- (1) a statement of registration under Chapter 82 (relating to limited liability partnerships and limited liability limited partnerships); or
- (2) a similar filing under the organic law of a foreign general partnership.

A limited liability limited partnership is a domestic or foreign limited partnership for which there is in effect:

- (1) a statement of registration under Chapter 82;
- (2) a provision of its certificate of limited partnership electing to be subject to Chapter 82; or
- (3) a similar filing or provision under the organic law of a foreign partnership.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email

or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability partnership or limited liability limited partnership. The name on this line must match exactly the association name as shown in Department's records at the time the Statement of Amendment/Termination is submitted for filing.

 This field is required.
- 2. Current address. The address provided must be the limited liability partnership's principal place of business or the limited liability limited partnership's registered office address as on file with the Department of State at the time the Statement of Amendment/Termination is submitted for filing. The registered office address may be a number and street address or the name of a Commercial Registered Office Provider.

Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

Instructions for Amendment Only (3-4):

A Statement of Amendment shall be filed upon the occurrence of any of the following events:

- (1) A change in the name of the limited liability partnership.
- (2) A change in address of the limited liability partnership.

This form may be used by both limited liability partnerships and limited liability limited partnerships to file a change in address. DSCB:15-1507/5507/8625/8825 (Statement or Certificate of Change of Registered Office) may be used by a domestic limited partnership which has registered as a limited liability limited partnership pursuant to 15 Pa.C.S. § 8201. However, a domestic general partnership which has registered as a limited liability partnership pursuant to 15 Pa.C.S. § 8201 must use this form to amend the address of its principal place of business.

- 3. The Statement of Amendment shall restate in full the statement of registration. The restated Statement of Registration must be attached as an exhibit. The restated Statement of Registration supersedes the original Statement of Registration and all previous amendments thereto. This exhibit is required.
- 4. The statement in this field is required for a Certificate of Amendment.

Instructions for Termination Only (5-6):

- **5.** The statement in **this field is required** for a Certificate of Termination.
- **6.** The statement in **this field is required** for a Certificate of Termination.
- 7. Any date specified as the effective date of the Statement of Amendment/Termination must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the delivery of the Statement of Amendment/Termination to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If neither option for an effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.

Signature and Verification

This form shall be signed by a general partner. Any natural person of full age, corporation, partnership, limited liability company, business trust, other association, government entity (other than the Commonwealth), estate, trust or foundation may be designated as a general partner in the general partnership or limited partnership which has registered and may execute this form. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) If this form is being used to amend the Certificate of Registration, the amended and restated Certificate of Registration as an exhibit.
- (2) If the amendment reflects a change of name, one copy of a completed form DSCB:15-134B (Docketing Statement-Changes).
- (3) If the amendment reflects a change of name, any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (4) Any necessary governmental approvals.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Certificate of Annual Registration
Name	DSCB.15-8221/8998 (rev. 1/1/2016)
Address	
City State Zip Co	de
Return document by email to:	
Read all instructions prior to completing. This form	$may\ be\ submitted\ online\ at\ \underline{https://www.corporations.pa.gov/}.$
Fee: See Instructions C and E.	
	ip/Limited Liability Limited Partnership (§ 8221) nited Liability Company (§ 8998)
	plicable provisions (relating to annual registration), the ship/limited liability limited partnership/restricted professional
1. The name of the limited liability partnership/lin limited liability company is:	mited liability limited partnership/restricted professional
Limited Liability Partnership/Limited Liability	Limited Partnership: complete only paragraph 2
	(the number of persons who were general partners of d who are described in § 8221(b)(1)) accompanies this
Restricted Professional Limited Liability Compa	ny: complete only paragraphs 3 and 4
3. Check one of the following:	nyi compiete ony paragrapaso ana i
	nitted by § 8996(a) (relating to purposes of restricted a respect to which this certificate is being filed.
	tted by § 8996(a) (relating to purposes of restricted a respect to which this certificate is being filed.
	(the number of persons who were members of this and who are described in § 8998(b)(1)) accompanies this
	IN TESTIMONY WHEREOF, the undersigned general partner/ member has executed this Certificate of Annual Registration this day of
	Signature

DSCB:15-8221/8998 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Instructions

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form depends on the type of organization and how many general partners (for LLPs and LLLPs) or members (for professional LLCs). Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

Any domestic or foreign limited liability partnership (LLP), limited liability limited partnership (LLLP) and any domestic or foreign restricted professional company (PLLC) in existence on December 31 of any year is required to file a Certificate of Annual Registration. This form and the corresponding annual registration fee must be filed on or before April 15 of each year following the year with respect to which it is being filed.

This form is *only* for limited liability partnerships, limited liability limited partnerships and restricted professional companies. It is *not* for limited liability companies which do not render restricted professional services (see **definitions** below).

Definitions

A limited liability partnership is any domestic general partnership which has elected limited liability status with a registration under section 8201(a) (relating to scope) or any foreign general partnership which has registered under section 412 (relating to foreign registration statement).

A limited liability limited partnership is any domestic limited partnership which has elected limited liability status with a registration under section 8201(a) (relating to scope) or any foreign limited partnership which has registered under section 412 (relating to foreign registration statement). A restricted professional company is a limited liability company that renders one or more restricted professional services.

Restricted professional services are the following professional services: chiropractic, dentistry, law, medicine and surgery, optometry, osteopathic medicine and surgery, podiatric medicine, public accounting, psychology or veterinary medicine.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability partnership/limited liability limited partnership/restricted professional company. The name on this line must match exactly the association name as shown in Department's records at the time the Certificate of Annual Registration is submitted for filing. This field is required.
- 2. To be completed by Limited Liability Partnerships/ Limited Liability Limited Partnerships only.

Fill in the number of persons who were general partners of the partnership on December 31 and the year to which that number relates. The annual fee is required to be paid only with respect to a general partner who:

- In the case of a natural person, had his principal residence in Pennsylvania on December 31, or
- In the case of any other person, was incorporated or otherwise organized or existing under the laws of Pennsylvania on December 31. See §8221(b)(1).

The nonrefundable annual fee of \$350 times the number of persons who were general partners of the partnership on December 31 shall accompany this form and shall be made payable to the Department of State. The base fee was increased to \$350 on December 31, 2015. See \$8221(b)(2). Failure to file the annual registration by April 15 will result in a lien on the assets of the partnership. If a certificate of annual registration is not filed by May 15, a penalty of \$500 will be assessed against the partnership, which will create a second lien on the assets of the partnership.

Failure to file the certificate of annual registration for five consecutive years will result in the automatic termination of the status of a *domestic* limited liability partnership or limited liability limited partnership as such. Failure to file the certificate of annual registration for five consecutive years will result in the automatic termination of the registration of a *foreign* limited liability partnership or limited liability limited partnership.

3. To be completed by Restricted Professional Companies only.

The certificate of annual registration must include a statement by the company as to whether or not it engaged in any business not permitted by section 8996(a) (relating to purposes of restricted professional companies) during the year with respect to which the certificate is being filed.

§ 8996. Restrictions.

(a) Purposes of restricted professional companies. --

A restricted professional company shall not engage in any business other than conducting the practice of the restricted professional service or services for which it was specifically organized, except that a restricted professional company may:

- (1) Own real and personal property necessary for or appropriate or desirable in the fulfillment or rendering of its specific restricted professional service or services and it may invest its funds in real estate, mortgages, stocks, bonds or any other type of investment.
- (2) Be a partner, shareholder, member or other owner of a partnership, corporation, limited liability company or other association engaged in the business of rendering the restricted professional service or services for which the restricted professional company was organized.

4. To be completed by **Restricted Professional** Companies only.

Fill in the number of persons who were members of the company on December 31 and the year to which that number relates. The annual fee is required to be paid only with respect to a member who:

- Was licensed to practice the professional service rendered by the company on December 31; and
- Had principal residence in Pennsylvania on December 31. See §8998(b)(1).

The nonrefundable annual fee of \$520 times the number of persons who were members of the company on December 31 shall accompany this form and shall be made payable to the Department of State. The base fee was increased to \$520 on December 31, 2015. See \$8998(b)(2). Failure to file the annual registration by April 15 will result in a lien on the assets of the company. If a certificate of annual registration is not filed by May 15, a penalty of \$500 will be assessed against the company, which will create a second lien on the assets of the company.

Signature and Verification

An authorized representative of the limited liability partnership, limited liability limited partnership or restricted professional company must sign the Certificate of Annual Registration. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Certificate of Partnership Authority		
Name			DSCB:15- (2/2017	
Address		****		
City State	Zip Code			
Return document by email to:			8433	
Fee: \$70	Read all instructions p	prior to completing.		
In compliance with the requireme partnership authority), the undersigned ge amendment or cancellation thereto) hereby	neral partnership des y states that:	iring to effect a certif		
I. Required fields for Certificate, Ame	ndment or Cancella	ntion		
1. The name of the general partnershi	p is:			
2. Complete part (a) OR (b) – not bot	th:			
(a) The partnership is a domestic g number and street, if any, of its pri			nership and	the address, including
Number and street of principal office	ce City	State	Zip	County
(b) The partnership is a registered office in this Commonwealth or (2) (Complete (1) or (2), not both)				
(1)Number and Street	- C'	0		
	City	State	Zip	County
(2) Name of Commercial Registered Office	ce Provider		County	·
 II. Certificate of Partnership Authorit 1. All persons holding the following with respect to the partnership has positions, attach additional pages Sign an instrument transfel limitation may be provided 	position (e.g., Generated the authority to do to as needed. erring real property h	the following: Check of the name of the	all that appl e partnership	

DSCB:15-8433	33 – 2	
	☐ Enter into other transactions on behalf of, or otherwise act for or bir or limitation may be provided. <i>Additional pages may be attached as</i>	
2. The fo	following named person (e.g., Jane Smith)	has the authority to do al pages as needed.
	☐ Sign an instrument transferring real property held in the name of the limitation may be provided. Additional pages may be attached as not be at	
	Enter into other transactions on behalf of, or otherwise act for or bir or limitation may be provided. Additional pages may be attached as	
If amendi the follow The C	Iment to Certificate of Partnership Authority Inding a Certificate of Authority previously filed in the Department of States and States are certificate of Partnership Authority that became effective on	is amended.
If cancelli complete	lation of Certificate of Partnership Authority elling a Certificate of Authority previously filed in the Department of Stete the following. e Certificate of Partnership Authority that became effective	tate, check the box below and is cancelled.
	ONY WHEREOF, the undersigned has caused this Certificate/Amendment be be signed by a person duly authorized by the general partnership thereof, 20	
	Name	of Partnership
		ignature
		Title

DSCB:15-8433 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used by a general partnership to set forth, amend or cancel partnership authority. Each partner is an agent of the partnership for the purpose of its business. An act of a partner, including the signing of an instrument in the partnership name, for apparently carrying on in the ordinary course the partnership business or business of the kind carried on by the partnership binds the partnership, unless the partner did not have authority to act for the partnership in the particular matter and the person with which the partner was dealing knew or had notice that the partner lacked authority. This statutory apparent authority may be altered by the filing or recording of a Certificate of Partnership Authority under 15 Pa.C.S. § 8433, which establishes the mechanics for and the legal effect of filing or recording a Certificate of Partnership Authority.

Applicable Law

For relations of partners to persons dealing with partnership, in general, see 15 Pa.C.S. §§ 8431-8438. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

Section I. is required whether setting forth, amending or cancelling partnership authority. To state partnership authority, complete Section I and Section II. To amend partnership authority, complete Section I and Section III. To

cancel partnership authority, complete Section I and Section IV. Do not complete any combination of Section II, III, or IV

Section I. This field is always required.

- I. 1. Give the exact name of the partnership. The name on this line must match exactly the partnership name if on file with the Department at the time the Certificate/Amendment/ Termination of Partnership Authority is submitted for filing. This field is required.
- I. 2. Current address. The address provided must be the address of the partnership's principal place of business if the partnership is a domestic general partnership or limited liability partnership (a) or the partnership's registered office address (b) as on file with the Department of State at the time the Certificate/Amendment/Termination of Partnership Authority is submitted for filing, if the partnership is a registered foreign limited liability partnership. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

Section II. This field is required in addition to **Section I** only if the general partnership is stating partnership authority.

- II. 1. This field is required if the partnership is delegating authority to a position, rather than a specific person. List the title of the position that will possess the delegated authority. Check one or both boxes indicating which authority will be delegated to the listed position. Other specifications or limitations may be provided, per the partnership's preference. Additional pages may be attached as needed. If the partnership would like to delegate authority to multiple positions, attach additional pages as needed.
- II. 2. This field is required if the partnership is delegating authority to a specific individual, rather than a position. Provide the name of the individual that will possess the delegated authority. Check one or both boxes indicating which authority will be delegated to the listed individual. Other specifications or limitations may be provided, per the partnership's preference. Additional pages may be attached as needed. If the partnership would like to delegate authority to multiple individuals, attach additional pages as needed.

Section III. This field is required in addition to **Section I** only if the general partnership is amending a Certificate of

Partnership Authority which is already on file with the Department of State.

Check the box. List the date that the Certificate of Partnership Authority that is being amended became effective. List verbatim, the content of the amendment. Additional pages may be attached as needed.

Section IV. This field is required in addition to **Section I** only if the general partnership is canceling a Certificate of Partnership Authority which is already on file with the Department of State.

Check the box. List the date that the Certificate of Partnership Authority that is being canceled became effective.

Signature and Verification

An authorized representative of the partnership must sign the Certificate of Partnership Authority (or amendment or cancellation thereto). Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Certificate of Denial - General Partnership
Name	DSCB:15-8434 (2/2017)
Address	110011101111111111111111111111111111111
City State Zip Code	
☐ Return document by email to:	8434
Fee: \$70	prior to completing.
In compliance with the requirements of the applicable denial of partnership authority), the undersigned person desiring hereby states that:	provisions of 15 Pa.C.S. § 8434 (relating to certificate of g to effect a certificate of denial of partnership authority
1. The name of the general partnership is:	
2. Complete part (a) OR (b) – not both:	
(a) The partnership is a domestic general partnership o number and street, if any, of its principal place of busin	
Number and street of principal office City	State Zip County
office in this Commonwealth or (2) name of its comme (Complete (1) or (2), not both)	lity partnership and the (1) address of its current registered registered office provider and the county of venue is:
Number and Street City	State Zip County
Name of Commercial Registered Office Provider	
Name of Commercial Registered Office Provider 3. The caption of the Certificate of Authority to which th	County is denial pertains. Additional pages may be attached as
needed.	
4. I deny the grant of authority in the caption listed above	s.
IN TESTIMONY WHEREOF, the undersigned has caused thi thereof this day of, 20	
	Name of Partnership
	Signature

Title

DSCB:15-8434 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used by a person named in a filed Certificate of Authority pertaining to a general partnership to deny such authority. The Certificate of Denial operates as a restrictive amendment to the Certificate of Partnership Authority and a certified copy may be recorded by the partnership or the person that delivered the Certificate of Denial to the Department of State for filing. The Certificate of Denial affects only the authority of a person to bind a partnership with respect to persons that are not partners.

Applicable Law

For relations of partners to persons dealing with partnership, in general, see 15 Pa.C.S. §§ 8431-8438. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the partnership. The name on this line must match exactly the partnership name if on file with the Department at the time the Certificate of Denial of Partnership Authority is submitted for filing. This field is required.
- 2. Current address. The address provided must be the address of the partnership's principal place of business if the partnership is a domestic general partnership or a limited liability partnership (a) or the partnership's registered office address (b) as on file with the Department of State at the time the Certificate of Denial of Partnership Authority is submitted

for filing, if the partnership is a registered foreign limited liability partnership.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

- 3. This field should briefly summarize the scope of authority which is being denied. This field is required.
- 4. Mandatory statement. This field is required.

Signature and Verification

A Certificate of Denial of Partnership Authority by a person must be signed by that person. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Certificate of Dissociation as Partner DSCB:15-8474/8665
Name	(2/2017)
Address City State Zip Code	
Return document by email to:	
Read all instructions prior to completing. This form may be	be submitted online at https://www.corporations.pa.gov/.
Fee: \$70	
Check one:	☐ From Limited Partnership (§ 8665)
In compliance with the requirements of 15 Pa.C.S. § 84 undersigned person dissociated as a partner, hereby states that	
1. The name of the general or limited partnership is:	
2. Complete part (a) OR (b) – not both:	
(a) The partnership is a domestic general partnership or lin and street, if any, of its principal place of business is:	nited liability partnership and the address, including number
Number and street of principal office City	State Zip County
	mited liability limited partnership, and the (1) address of its e of its commercial registered office provider and the county
(1) Number and Street City	
	State Zip County
(2)Name of Commercial Registered Office Provider	County
3. The name of the person who has dissociated from the partn	·
	ciated from the general partnership. ciated as a general partner from the limited partnership.
IN TESTIMONY WHEREOF, the undersigned person has car day of, 20	used this Certificate of Dissociation to be executed this
 -	Name of Person
	Signature
	Title

DSCB:15-8474/8665-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

When a person has dissociated or withdrawn as a general partner from a general or limited partnership, that person may deliver to the Department of State a Certificate of Dissociation.

Applicable Law

For requirements for Certificate of Dissociation, see 15 Pa.C.S. § 8474 (general partnerships) and 15 Pa.C.S. § 8665 (limited partnerships). For events which cause dissociation, see 15 Pa.C.S. § 8461 (general partnerships) and 15 Pa.C.S. § 8663 (limited partnerships). Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the general or limited partnership. The name on this line must match exactly the association name as shown in Department's records, if applicable, at the time the Certificate of Dissociation is submitted for filing. This field is required.
- 2. Current address. The address provided must be the address of the partnership's principal place of business if the partnership is a domestic general partnership or limited liability partnership (a) or the partnership's registered office address (b) as on file with the Department of State at the time the Certificate of Dissociation is submitted for filing, if the partnership is a limited partnership or limited liability limited

partnership. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

- 3. Set forth the name of the person who has dissociated from the partnership. This field is required.
- **4.** Check appropriate box for either general or limited partnership. Check only one box. Mandatory statement. **This field is required.**

Signature and Verification

A Certificate of Dissociation must be signed by the person dissociated as a general partner. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects.

This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Certificate of Dissolution Domestic General Partnership		
Name		DSCB:1	5-8482(b)(2))(i) (2/2017)
Address City State	Zip Code			
Return document by email to:		1100101101111	8482B2i	
Read	all instructions p	prior to completing.		
Fee: \$70				
Caution: This form does not end the existence of active associations in the records of the Dep Termination).				
In compliance with the requirements of Certificate of Dissolution), the undersigned ge				
1. The name of the partnership is:				
2. The partnership is a domestic general p and street, if any, of its principal place of the street of principal office.	of business is:			
		nited liability partnersh State	ip and the ad	dress, including number
and street, if any, of its principal place	of business is:			
and street, if any, of its principal place of Number and street of principal office	of business is: City d general partne	State rship has caused this C	Zip	County Dissolution to be signed
and street, if any, of its principal place of Number and street of principal office 3. The partnership is dissolved. IN TESTIMONY WHEREOF, the undersigne	of business is: City d general partne	State rship has caused this C	Zip	County Dissolution to be signed
and street, if any, of its principal place of Number and street of principal office 3. The partnership is dissolved. IN TESTIMONY WHEREOF, the undersigne	of business is: City d general partne	State rship has caused this C day of	Zip	County Dissolution to be signed

Title

DSCB:15-8872(b)(2)-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

A dissolved general partnership (which may have filed a Statement of Registration as a domestic limited liability partnership) shall wind up its business and the partnership continues after dissolution only for the purpose of winding up. In winding up its business, a partnership shall discharge the partnership's debts, obligations and other liabilities, settle and close the partnership's activities and affairs, and marshal and distribute the assets of the partnership. It may deliver to the Department of State for filing a Certificate of Dissolution.

The term "dissolution" indicates the beginning of the end for unincorporated associations such as partnerships and limited liability companies. The end itself is labeled "termination." See 15 Pa.C.S. § 8482(b)(2)(vi).

Upon the filing of a Certificate of Dissolution, the partnership may preserve the partnership's business and property as a going concern for a reasonable time; prosecute and defend actions and proceedings, whether civil, criminal or administrative; transfer the partnership's property; settle disputes by mediation or arbitration; and perform other acts necessary or appropriate to the winding up.

Applicable Law

For dissolution, winding up and termination of general partnerships, in general, see 15 Pa.C.S. §§ 8481-8486. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

(1) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the general partnership or limited liability partnership as on file with the Department of State, if applicable. This field is required.
- 2. Current address. The address provided must be the address of the partnership's principal place of business as on file with the Department of State, if applicable, at the time the Certificate of Dissolution is submitted for filing. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

3. Mandatory statement. This field is required.

Signature and Verification

An authorized representative of the partnership must sign the Certificate of Dissolution. See 15 Pa.C.S. § 8418. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects.

This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Certificate of Termination Domestic General Partnership	
Name	DSCB:15-8482(b)(2)(vi) (2/2017)	
Address		
City State Zip Code		
Return document by email to:	8482B2VI	
Read all instructions p	prior to completing.	
Fee: \$70		
In compliance with the requirements of 15 Pa.C.S. § 84 undersigned general partnership, desiring to terminate, hereby		
1. The name of the general partnership is:		
and street, if any, of its principal place of business is:		
Number and street of principal office City	State Zip County	
3. The partnership is terminated.		
IN TESTIMONY WHEREOF, the undersigned general partne by a duly authorized representative thereof this		
	Name of General Partnership	
	Signature	

Title

DSCB:15-8482(b)(2)(vi)-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

When all debts, obligations and other liabilities of the general partnership have been paid and discharged or adequate provision has been made therefor and all of the remaining property and assets of the partnership have been distributed to the partners, a domestic general partnership (which may have filed a Statement of Registration as a domestic limited liability partnership) may execute a Certificate of Termination and deliver it to the Department of State for filing, along with the certificates required by section 139 (relating to tax clearance of certain fundamental transactions).

A Certificate of Termination will serve to remove the general partnership from the rolls of active associations in the records of the Department, if applicable. Upon the filing of a Certificate of Termination, the existence of the general partnership shall cease, except for the purpose of legal actions, other proceedings and appropriate action as provided by law.

Applicable Law

For dissolution, winding up and termination of general partnerships, in general, see 15 Pa.C.S. §§ 8481-8486. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- Tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth as described in the following paragraph.
- (2) Any necessary governmental approvals.

Tax clearance certificates:

A domestic general partnership may not file a Certificate of Termination unless the document is accompanied by tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing the payment by

the association of all taxes and charges due the Commonwealth required by law. To obtain these clearance certificates, a Form REV-181 (Application for Tax Clearance Certificate) must be completed and submitted to both the Department of Revenue and the Department of Labor and Industry. The application and instructions may be downloaded from the Department of Revenue website at www.revenue.pa.gov or obtained by calling 717-783-6052.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the general partnership as on file with the Department of State, if applicable. This field is required.
- 2. Current address. The address provided must be the address of the partnership's principal place of business as on file with the Department of State, if applicable, at the time the Certificate of Termination is submitted for filing. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

3. Mandatory statement. This field is required.

Signature and Verification

An authorized representative of the partnership must sign the Certificate of Termination. See 15 Pa.C.S. § 8418. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

☐ Return document by mail to:	Certificate of Limited Partnership
Name	DSCB:15-8621 (rev. 2/2017)
Address	10000000000000000
City State Zip Code	
Return document by email to:	8621
Read all instructions prior to completing. This form may be	be submitted online at https://www.corporations.pa.gov/.
Fee: \$125	st-owned small business fee exemption (see instructions)
In compliance with the requirements of 15 Pa.C.S. § 86 undersigned, desiring to form a limited partnership, hereby cer	
1. The name of the limited partnership (may contain the word abbreviation of these terms):	d "company," "limited" or "limited partnership" or any
2. Complete part (a) or (b) – not both:	
(a) The address of this limited partnership's registered of (post office box alone is not acceptable)	fice in this Commonwealth is:
Number and Street City	State Zip County
(b) The name of this limited partnership's commercial re	egistered office provider and county of venue is:
c/o:	
Name of Commercial Registered Office Provider	County
3. The name and address, including street and number, if any, Name Add	
4. Effective date of Certificate (check, and if appropriate com	plete, one of the following):
☐ The Certificate of Limited Partnership shall be effective	upon filing in the Department of State.
☐ The Certificate of Limited Partnership shall be effective	on: at Date (MM/DD/YYYY) Hour (if any)
IN TESTIMONY WHEREOF, the undersigned general partne Certificate of Limited Partnership this day of	
	Signature
	Signature
	Signature

DSCB:15-8621-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$125. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Certificate of Limited Partnership form when submitted. For more information on the fee exemption, see Fees and Payments.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

One or more persons forming a limited partnership must file a certificate of limited partnership in the Department of State.

Applicable Law

See 15 Pa.C.S. § 8621 for general information on Formation of Limited Partnership and Certificate of Limited Partnership. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Limited Partnership Name Requirements

Generally, the name of an association may not be the same as the name of another association which is already on the records of the Department of State. Depending on the type of association, certain designators must be used in the association name. Designators are the words or abbreviations used at the end of the association name which designate the type of association. The minimum requirements for limited partnership names can be found at 15 Pa.C.S. §§ 201, 202 and 204.

The name of a domestic limited partnership is not required to contain a word or abbreviation indicating that it is a limited partnership and may contain the name of a partner. However, if the limited partnership is a limited liability limited partnership, the name must contain the term "company," "limited" or "limited liability limited partnership" or a term of like import; or an abbreviation of one of those terms

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the

filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited partnership. This should include the exact spelling, punctuation and a permissible designator, if any. This field is required.
- 2. Address. This address must be in Pennsylvania. Give one of the following: the registered office address in the Commonwealth in (a) or the name of a Commercial Registered Office Provider in (b) and the county of venue.

Listing a Commercial Registered Office Provider in lieu of providing a registered office address is an option for any association that does not have a physical location or mailing address in Pennsylvania. Prior to listing a Commercial Registered Office Provider address, the association should enter into a contract for the services of the Commercial Registered Office Provider.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

This field is required.

3. A general partner may include a corporation, partnership, limited liability company, business trust, other association, government entity (other than the Commonwealth), estate, trust, foundation or natural person. When the limited partnership has more than three general partners, additional lines should be added as appropriate.

An actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. **This field is required.**

4. Effective date. Any date specified as the effective date of the Certificate of Limited Partnership must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the Certificate's delivery to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If no effective date is provided, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.

Additional provisions. A Certificate of Limited Partnership may contain statements as to matters other than those required by 15 Pa.C.S. § 8621(b), but may not vary or otherwise affect the provisions specified under § 8615(c) and (d) (relating to contents of partnership agreement) in a manner inconsistent with that section. Additional provisions of the certificate, if any, should be attached on $8\frac{1}{2} \times 11$ sheet(s).

Signature and Verification

All general partners must sign the Certificate of Limited Partnership. If a general partner is not a natural person, an authorized representative of the organizing association must sign the Certificate. When the limited partnership has more than three executing general partners, additional signature lines should be added as appropriate. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (2) Any necessary governmental approvals.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Keturn document by mail to:	Certificate of Amendment - Domestic Limited Partnership/Limited Liability Company
Name	DSCB:15-8622/8822 (rev. 2/2017)
Address	
City State Zip Code	
Return document by email to:	8622
Read all instructions prior to completing. This form may	be submitted online at https://www.corporations.pa.gov/ .
Fee: \$70	
Check one: Limited Partnership (§ 8622)	☐ Limited Liability Company (§ 8822)
In compliance with the requirements of the applicabl Certificate), the undersigned, desiring to amend or restate its Organization, hereby certifies that:	le provisions (relating to Amendment or Restatement of Certificate of Limited Partnership/Certificate of
1. The name of the limited partnership/limited liability compa	any is:
2. The date of filing of the original Certificate of Limited Pa	rtnership/Certificate of Organization is:
Date (MM/DD/YYYY) 3. The current registered office address as on file with the Decay (a)	epartment of State. Complete part (a) OR (b) – not both:
(a)	State Zip County
(b) c/o: Name of Commercial Registered Office Provider	- County
	County
4. Check, and if appropriate complete, one of the following	
☐ The amendment adopted by the limited partnership/l	imited liability company, set forth in full, is as follows:
	<u> </u>
The amendment adopted by the limited partnership/l attached hereto and made a part hereof.	imited liability company is set forth in full in Exhibit A
5. Effective date of amendment (check, and if appropriate	complete, one of the following):
☐ The amendment shall be effective upon filing this Co☐ The amendment shall be effective on:	at .
Date (MM/DD	D/YYYY) Hour (if any)

DSCB:15-8622/8822-2

6.	Check if the amendment restates the Certificate of Limited Partnership/Certificate of Organization:
	☐ The restated Certificate of Limited Partnership/Certificate of Organization supersedes the original Certificate of Limited Partnership/Certificate of Organization and all previous amendments thereto.
	TESTIMONY WHEREOF, the undersigned limited partnership/limited liability company has caused this Certificate Amendment to be executed by a duly authorized person thereof this day of
	Name of Limited Partnership/Limited Liability Company
	Signature
	Title

DSCB:15-8622/8822-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

A certificate of limited partnership may be amended or restated at any time.

A limited partnership shall promptly deliver to the Department of State for filing an amendment to its certificate of limited partnership to reflect:

- (1) the admission of a new general partner;
- (2) the dissociation of a person as a general partner;
- (3) the appointment of a person to wind up the partnership's activities and affairs under section 8682(c) or (d) (relating to winding up and filing of certificates).

If a general partner knows that any information in a filed certificate of limited partnership is inaccurate, the general partner shall promptly cause the certificate to be amended. Form DSCB: 15-1507/5507/8625/8825 (Statement or Certificate of Change of Registered Office) may be used if the only change in the certificate is a change of registered office.

A certificate of organization may be amended or restated at any time. If a member of a member-managed limited liability company, or a manager of a manager-managed limited liability company, knows that any information in a filed certificate of organization is inaccurate, the member or manager shall promptly cause the certificate to be amended. Form DSCB: 15-1507/5507/8625/8825 (Statement or Certificate of Change of Registered Office) may be used if the only change in the certificate is a change of registered office.

Applicable Law

For amendment and restatement requirements for limited partnerships, see 15 Pa.C.S. § 8622. For amendment and restatement requirements for limited liability companies, see 15 Pa.C.S. § 8822. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited partnership/limited liability company. The name on this line must match exactly the association name as shown in Department's records at the time the Certificate of Amendment is submitted for filing. This field is required.
- 2. Give the date of filing of the original Certificate of Limited Partnership/Certificate of Organization (month, day and year). This field is required.
- 3. Current address. The address provided must be the limited partnership/limited liability company's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Certificate of Amendment is submitted for filing. This field is required.
- 4. Set forth the amendment in full or attach as an exhibit. This field is required.
- 5. Any date specified as the effective date of the Certificate of Amendment must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the Certificate's delivery to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If neither option for effective date is checked, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.
- 6. To restate its certificate of limited partnership, a limited partnership must deliver to the Department for filing a certificate of amendment that is designated as a restatement and includes a statement that the restated certificate supersedes the original certificate and all previous amendments. Similarly, to restate its certificate of organization, a limited liability company must deliver to the Department for filing a certificate of amendment that is designated as a restatement and includes a statement that the restated certificate supersedes the original certificate and all

previous amendments.

Signature and Verification

An authorized representative of the association must sign the Certificate of Amendment. See 15 Pa.C.S. § 8623 and § 8823 (both relating to Signing of filed documents), for the required signatures for documents submitted by limited partnerships and limited liability companies, respectively. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Attachments

The following, in addition to the filing fee, shall accompany this form:

If the amendment effects a change of name,

- (1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).
- (2) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (3) Any necessary governmental approvals.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:			Certificate of Negation DSCB:15-8636		
Name			(2/2017)		
Address					IIIII
City	State	Zip Code			
Return document	by email to:			8636	
	Re	ad all instructions	prior to completing.		
Fee: \$70					
limited partner), the states that:		o erroneously but	in good faith believed	himself to be	a limited partner, hereby
1. The name of the	limited partnership is: _				
	stered office address as		partment of State. Com	plete part (a) $OR(b)$ – not both:
(a)Number and :	street	City	State	Zip	County
				•	·
Name of C	Commercial Registered Office	: Provider			County
3. The name of the	person delivering this c	ertificate to the De	partment for filing:		
4. The person name enterprise.	ed in paragraph 3 is not	a general partner a	nd withdraws from fut	ure participat	ion as an owner in the
	VHEREOF, the undersig			Negation to	be executed this
			Name o	of Person	
			Si	gnature	

Title

DSCB:15-8636-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

A person that makes an investment in a business enterprise and erroneously but in good faith believes that the person has become a limited partner in the enterprise (but the certificate of limited partnership lists the person as a general partner) is not liable for the enterprise's obligations by reason of making the investment, receiving distributions from the enterprise or exercising any rights of or appropriate to a limited partner, if, on ascertaining the mistake, the person:

- (1) causes an appropriate certificate of limited partnership, amendment or statement of correction to be signed and delivered to the department for filing;
- (2) if a certificate of limited partnership is on file in the department, withdraws from future participation as an owner in the enterprise by delivering to the department for filing a Certificate of Negation.

Applicable Law

For requirements for Certificate of Negation, see 15 Pa.C.S. § 8636. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

1. Give the exact name of the limited partnership. The name on this line must match exactly the association name as shown in Department's records at the time the Certificate of Negation is submitted for filing. **This field is required.**

2. Current address. The address provided must be the limited partnership's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Certificate of Negation is submitted for filing. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

- 3. Set forth the name of the person delivering the Certificate of Negation to the Department of State for filing.
- 4. Mandatory statement. This field is required.

Signature and Verification

A Certificate of Negation must be signed by the person erroneously believing himself to be a limited partner. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:		Voluntary Termination [Never Transacted Business] Domestic Limited Partnership			
Name		DSCB:15-8681.1 (2/2017)			
Address					
City State	Zip Code				
Return document by email to:		8681.1			
Fee: \$70	Read all instructions prior	to completing.			
In compliance with the requirement termination by partners for a limited partnership should be terminated,	nership that has never tran hereby states that:	sacted business), th	ne undersigr		
1. The name of the limited partnership is:					
2. The current registered office address of Complete part (a) OR (b) – not both:	of the partnership as on file	e with the Departm	ent of State		
Number and street	City	State	Zip	County	
(b) c/o:Name of Commercial Registered Off					
Name of Commercial Registered Off	ice Provider			County	
3. The partnership has never transacted b	ousiness or held assets oth	er than money rece	ived as capi	tal contributions.	
4. The amounts, if any, actually paid in a returned to those entitled to the return		oart disbursed for n	ecessary ex	penses, have been	
5. A majority of the general partners elec	et that the limited partners	hip be terminated.			
6. Check one of the following:					
☐ All liabilities of the partnership h	nave been discharged.				
Adequate provision has been made	de for the payment of the	liabilities of the par	rtnership.		
IN TESTIMONY WHEREOF, at least a hereunto set their hands this day			-named limi	ited partnership has	
	_		Signatur	e	
	_		Siamat	Δ	
			Signatur		
	-	***	Signatur	e	

DSCB:15-8681.1 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70, made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used to terminate a domestic limited partnership that has never transacted business or held assets other than money received as capital contributions.

If a domestic limited partnership has transacted business, it must use form DSCB:15-8682(e) (Certificate of Termination – Limited Partnership) to terminate the limited partnership.

Applicable Law

For termination, dissolution, and winding up requirements by general partners, in general, see 15 Pa.C.S. §§ 8681-8690. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on

this form will become part of the filed document and therefore public record.

- 1. Name. Give the exact name of the limited partnership. The name on this line must match exactly the association name as shown in Department's records at the time the Voluntary Termination [Never Transacted Business] is submitted for filing. This field is required.
- 2. Address. The address provided must be the association's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Voluntary Termination [Never Transacted Business] is submitted for filing. This field is required.
- 3-5. Mandatory statement. This field is required.
- 6. Check the appropriate box. A response to this field is required.

Signature and Verification

The Voluntary Termination [Never Transacted Business] must be executed by a majority of general partners. When the partnership has more than three executing general partners, additional signature lines should be added as appropriate. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Attachments

The following, in addition to the filing fee, shall accompany this form:

(1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

-	Return document by mail to:			L	ificate of Ter imited Partn	ership
١.	Name			DSCB:	15-8682(e) (rev. 2/2017)
١_						
	City State ☐ Return document by email to:	Zip Code			8682E	
Ľ	Read all instructions prior to completing. This		ha aubmitt	ad anlina at h	.tt.= 0.1/2	
Fe	te: \$70	s torm may	oc suomin	cu omme at <u>n</u>	шрѕ.// w w w.	corporations.pa.gov/.
	In compliance with the requirements of 15 dersigned limited partnership, desiring to terminate the second s	Pa.C.S. § 86 nate, hereby	582(e) (rel states tha	ating to certif	icate of term	ination), the
1.	The name of the limited partnership is:	-			· · · · · · · · · · · · · · · · · · ·	<u> </u>
2.	The current registered office address as on file	with the De	partment of	of State. Comp	plete part (a,	OR (b) – not both:
	(a)Number and street	O':		0		
		City		State	Zip	County
	(b) c/o: Name of Commercial Registered Office Provide	er				County
3	Check one of the following:					
٥.	All debts, obligations and other liabilities	of the limite	d north ord	hin hava haasa	2 2	11
					=	•
	Adequate provision has been made for the the limited partnership.	e payment ar	id dischar	ge of the debt	s, obligation	s and other liabilities of
4.	All the remaining property and assets of the li accordance with their respective rights and int		ership have	e been distrib	uted among i	ts partners in
5.	Check one of the following:					
	☐ There are no actions pending against the l	imited partn	ership in a	ny court.		
	Adequate provision has been made for the partnership in any pending action.	e satisfaction	of any ju	dgment that n	nay be entere	ed against the limited
6.	The limited partnership is terminated.					
IN by	TESTIMONY WHEREOF, the undersigned line a duly authorized representative thereof this	mited partne	rship has o	caused this Ce	ertificate of T	Fermination to be signe
				Nama of Li	mited Partners	
				Name of Li	inited 1 artifers	пр
					0.	
					Signature	
					Title	
					I IUN	

DSCB:15-8682(e)-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

When all debts, obligations and other liabilities of the limited partnership have been paid and discharged or adequate provision has been made therefor and all of the remaining property and assets of the company have been distributed to the partners, a domestic limited partnership shall execute a Certificate of Termination and deliver it to the Department of State for filing, along with the certificates required by section 139 (relating to tax clearance of certain fundamental transactions).

A Certificate of Termination will serve to remove the limited partnership from the rolls of active associations in the records of the Department. Upon the filing of a Certificate of Termination, the existence of the limited partnership shall cease, except for the purpose of legal actions, other proceedings and appropriate action as provided by law.

Applicable Law

For dissolution, winding up and termination of limited partnerships, in general, see 15 Pa.C.S. §§ 8681-8690. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- Tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth as described in the following paragraph.
- (2) Any necessary governmental approvals.

Tax clearance certificates:

A domestic limited partnership may not file a Certificate of Termination unless the document is accompanied by tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing the payment by the association of all taxes and charges due the

Commonwealth required by law. To obtain these clearance certificates, a Form REV-181 (Application for Tax Clearance Certificate) must be completed and submitted to both the Department of Revenue and the Department of Labor and Industry. The application and instructions may be downloaded from the Department of Revenue website at www.revenue.pa.gov or obtained by calling 717-783-6052.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited partnership as on file with the Department of State. This field is required.
- 2. Current address. The address provided must be the limited partnership's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Certificate of Termination is submitted for filing. This field is required.
- 3. Check only one of the boxes, based on the status or situation of the terminating limited partnership. This field is required.
- 4. Mandatory statement. This field is required.
- 5. Check only one of the boxes, based on the status or situation of the terminating limited partnership. This field is required.
- 6. Mandatory statement. This field is required.

Signature and Verification

A Certificate of Termination must be signed by all general partners listed in the certificate of limited partnership or, if the certificate of a dissolved limited partnership lists no general partners, by the person appointed under 15 Pa.C.S. § 8682(c) or (d) to wind up the dissolved limited partnership's activities and affairs. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CORPORATIONS AND CHARITABLE ORGANIZATIONS

Return document by mail to:	Certificate of Organization Domestic Limited Liability Company DSCB:15-8821 (rev. 2/2017)			
Address	. .			
City State Zip Code Return document by email to:	8821			
Read all instructions prior to completing. This form may	be submitted online at https://www.corporations.pa.gov/ .			
Fee: \$125	vned small business fee exemption (see instructions)			
In compliance with the requirements of 15 Pa.C.S undersigned desiring to organize a limited liability comp	S. § 8821 (relating to certificate of organization), the any, hereby certifies that:			
1. The name of the limited liability company is: (designator is required, e.g., "company," "limited" or "li	mited liability company" or any abbreviation thereof)			
2. Complete part (a) or (b) – not both:				
(a) The address of this limited liability company's re (post office box alone is not acceptable)	egistered office in this Commonwealth is:			
Number and Street City	State Zip County			
(b) The name of this limited liability company's cor is:	nmercial registered office provider and county of venue			
c/o:				
Name of Commercial Registered Office Provider	County			
3. The name and address, including street and number, in page 2):	f any, of each organizer is (all organizers must sign on			
Name A	ddress			
4. Effective date of Certificate of Organization (check. a	and if appropriate complete, one of the following):			
4. Effective date of Certificate of Organization (check, and if appropriate complete, one of the following): The Certificate of Organization shall be effective upon filing in the Department of State.				
☐ The Certificate of Organization shall be effective of	on: at			
	Date (MM/DD/YYYY) Hour (if any)			

DSCB:15-8821-2

5.	Restricted professional companies only. Check the box if the limited liability company is organized to render a restricted professional service and check the type of restricted professional service(s).					
	☐ The company is a restricted professional company organized to render the following restricted professional service(s):					
	☐ Chiropractic ☐ Dentistry ☐ Law ☐ Medicine and surgery ☐ Optometry ☐ Osteopathic medicine and surgery ☐ Podiatric medicine ☐ Public accounting ☐ Psychology ☐ Veterinary medicine					
6.	Benefit companies only. Check the box immediately below if the limited liability company is organized as a benefit company:					
	This limited liability company shall have the purpose of creating general public benefit.					
	Optional specific public benefit purpose. Check the box immediately below if the benefit company is organized to have one or more specific public benefits and supply the specific public benefit(s). See instructions for examples of specific public benefit.					
	☐ This limited liability company shall have the purpose of creating the enumerated specific public benefit(s):					
7.	For additional provisions of the certificate, if any, attach $8\frac{1}{2}$ x 11 sheet(s).					
ΙN	TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization this					
	day of					
	Signature					
	Signature					
	Signature					

DSCB:15-8821-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$125. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Certificate of Organization form when submitted. For more information on the fee exemption, see Fees and Payments.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

One or more persons acting as organizers to form a limited liability company must file a certificate of organization in the Department of State.

Applicable Law

See 15 Pa.C.S. § 8821 for general information on Formation of Limited Liability Company and Certificate of Organization. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes. See also 15 Pa.C.S. § 8898 and § 8998 for provisions on annual reports/registrations that are required of benefit companies and restricted professional companies, respectively.

Limited Liability Company Name Requirements

Generally, the name of an association may not be the same as the name of another association which is already on the records of the Department of State. Depending on the type of association, certain designators must be used in the association name. Designators are the words or abbreviations used at the end of the association name which designate the type of association. The minimum requirements for limited liability company names can be found at 15 Pa.C.S. §§ 201, 202 and 204.

The name of a domestic limited liability company must contain:

- (1) the term "company," "limited" or "limited liability comp any" or an abbreviation of one of those terms, or
- (2) words or abbreviations of like import used in a jurisdiction other than this Commonwealth.

The name of a limited liability company may not contain any words implying that it is a business corporation, such as "corporation" or "incorporated" or an abbreviation of these terms.

Restricted words and/or approvals:

Association names may not contain words, phrases or abbreviations prohibited or restricted by statute or regulation, unless in compliance with the restriction, generally with the consent or approval of a government agency, board or commission. These may include certain professional and occupational boards or commissions of the Bureau of Professional and Occupational Affairs, the Department of Education, the Department of Banking and Securities, the Insurance Department or the Public Utility Commission. There are also words and abbreviations that may be restricted, prohibited, or may be permitted in certain instances as provided in various federal statutes, Attorney General opinions and Bureau regulations.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) One copy of a completed form DSCB:15-134A (Docketing Statement).
- (2) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (3) Any *necessary* governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability company. This should include the exact spelling, punctuation and a permissible designator. This field is required.
- 2. Address. This address must be in Pennsylvania. Give one of the following: the registered office address in the Commonwealth in (a) or the name of a Commercial Registered Office Provider in (b) and the county of venue.

Listing a Commercial Registered Office Provider in lieu of providing a registered office address is an option for any association that does not have a physical location or mailing address in Pennsylvania. Prior to listing a Commercial Registered Office Provider address, the association should enter into a contract for the services of the Commercial Registered Office Provider.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.

3. An organizer is a person that acts to form a limited liability company. "Person" is defined to include a corporation, partnership, limited liability company, business trust, other association, government entity (other than the Commonwealth), estate, trust, foundation or natural person. When the limited liability company has more than three organizers, additional lines should be added as appropriate.

An actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. **This field is required.**

- 4. Effective date. Any date specified as the effective date of the Certificate of Organization must be a future effective date (after the date and time of its delivery to the Department). A specified effective date may not be retroactive (prior to the date and time of the Certificate's delivery to the Department). If a delayed effective date is specified, but no time is given, then the time used will be 12:01 a.m. on the date specified. If no effective date is provided, it will be presumed that no specified delayed effective date is intended and the document will be effective upon filing. This field is required.
- 5. Restricted professional services are identified as the following professional services: chiropractic, dentistry, law, medicine and surgery, optometry, osteopathic medicine and surgery, podiatric medicine, public accounting, psychology or veterinary medicine. If the limited liability company is organized to render any of the identified restricted professional services, the box before the statement "The company is a restricted professional company organized to render the following restricted professional service(s)" must be checked and the appropriate restricted professional service(s) must be checked. If the limited liability company is not organized to render any of the identified restricted professional services, do not check the box or list a profession.

Note that restricted professional companies must file certificates of annual registration and pay annual registration fees in accordance with 15 Pa.C.S. § 8998.

6. A benefit company shall be formed in accordance with 15 Pa.C.S. § 8821, except that its certificate of organization shall also state that it is a benefit company.

A benefit company shall have a purpose of creating general public benefit. A "general public benefit" is defined as a material positive impact on society and the environment, taken as a whole and assessed against a third-party standard, from the business and operations of a benefit company. This purpose is in addition to its purpose under 15 Pa.C.S. § 8818(b).

The certificate of organization of a benefit company may identify one or more specific public benefits that it is the purpose of the benefit company to create in addition to its general public benefit purpose under 15 Pa.C.S. § 8894(a) and its purpose under 15 Pa.C.S. § 8818(b). "Specific public benefit" includes:

- (1) providing low-income or underserved individuals or communities with beneficial products or services;
- (2) promoting economic opportunity for individuals or communities beyond the creation of jobs in the normal course of business;
 - (3) preserving the environment;
 - (4) improving human health;
- (5) promoting the arts, sciences or advancement of knowledge;
- (6) promoting economic development through support of initiatives that increase access to capital for emerging and growing technology enterprises, facilitate the transfer and commercial adoption of new technologies, provide technical and business support to emerging and growing technology enterprises or form support partnerships that support those objectives:
- (7) increasing the flow of capital to entities with a public benefit purpose; and
- (8) the accomplishment of any other particular benefit for society or the environment.

Note that benefit companies must file annual benefit reports in accordance with 15 Pa.C.S. § 8898.

If the limited liability company is organized as a benefit company, the box before the statement "This limited liability company shall have the purpose of creating general public benefit" should be checked. If the limited liability company is organized as a benefit company, a specific public benefit purpose is optional. If the box before the statement "This limited liability company shall have the purpose of creating the enumerated specific public benefit(s)" is checked, one or more specific public benefits must be listed. If the limited liability company is not organized as a benefit company, do not check any of the boxes or list any specific public benefits.

7. Additional provisions. A certificate of organization may contain statements as to matters other than those required by 15 Pa.C.S. § 8821(b), but may not vary or otherwise affect the provisions specified under § 8815(c) and (d) (relating to contents of operating agreement) in a manner inconsistent with that section.

Signature and Verification

All organizers must sign the Certificate of Organization. If an organizer is not a natural person, an authorized representative of the organizing association must sign the Certificate. When the limited liability company has more than three executing organizers, additional signature lines should be added as appropriate. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

Return document by mail to:	Certificate of Limited Liability Company Authority DSCB:15-8832	
Name	(2/2017)	
Address	1 111 11 1111 1111 1111 1111 1111 1111	
City State Zip Code		
Return document by email to:	8832	
Read all instructions p	prior to completing.	
In compliance with the requirements of the applicable authority), the undersigned limited liability company, desiring cancellation thereto) hereby states that:	provisions of 15 Pa.C.S. § 8832 (relating to certificate of to effect a certificate of authority (or amendment or	
I. Required fields for Certificate, Amendment or Cancella	ntion	
1. The name of the limited liability company is:		
The current registered office address as on file with the (a)	State Zip County	
(b) c/o:	County	
attach additional pages as needed.	e following: Check all that apply. For additional positions neld in the name of the company. Other specification or	
☐ Enter into other transactions on behalf of, or o or limitation may be provided. <i>Additional pag</i>	otherwise act for or bind, the company. Other specification tes may be attached as needed.	

DSCB:15-8832 – 2	
2. The following named person (i.e., John the following: <i>Check all that apply. Fo</i>	Smith) has the authority to do r additional persons, attach additional pages as needed.
	greal property held in the name of the company. Other specification or diditional pages may be attached as needed.
	a behalf of, or otherwise act for or bind, the company. Other specification Additional pages may be attached as needed.
the following: The Certificate of Company Authority	Authority viously filed in the Department of State, check the box below and complete to that became effective on is amended. Date (MM/DD/YYYY) ated below. Additional pages may be attached as needed.
complete the following.	eviously filed in the Department of State, check the box below and
In Commence of Company Additions	that became effective is cancelled. Date (MM/DD/YYYY)
IN TESTIMONY WHEREOF, the undersigned duly authorized by the company thereof this	I has caused this Certificate of Company Authority to be signed by a person day of, 20
	Name of Limited Liability Company
	Signature
	Title

DSCB:15-8433 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used by a limited liability company to set forth, amend or cancel company authority. With the exception of manager-managed limited liability companies identified as such in their certificates of organization, other law – especially the common law of agency – determines the apparent authority to bind a limited liability company. This apparent authority may be altered by the filing or recording of a Certificate of Company Authority under 15 Pa.C.S. § 8832, which establishes the mechanics for and the legal effect of filing or recording a Certificate of Company Authority.

Applicable Law

For relations of members and managers to persons dealing with limited liability company, in general, see 15 Pa.C.S. §§ 8831-8835. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

Section I. is required whether setting forth, amending or cancelling company authority. To state company authority, complete Section I and Section II. To amend company authority, complete Section I and Section III. To cancel company authority, complete Section I and Section IV. Do not complete any combination of Section II, III, or IV.

Section I. This field is always required.

- I. 1. Give the exact name of the limited liability company. The name on this line must match exactly the company name as on file with the Department at the time the Certificate of Company Authority is submitted for filing. This field is required.
- **I. 2.** Current address. The address provided must be the company's registered office address on file with the Department of State at the time the Certificate of Company Authority is submitted for filing. **This field is required.**

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

Section II. This field is required in addition to Section I only if the company is stating company authority.

- II. 1. This field is required if the company is delegating authority to a position, rather than a specific person. List the title of the position that will possess the delegated authority. Check one or both boxes indicating which authority will be delegated to the listed position. Other specifications or limitations may be provided, per the company's preference. Additional pages may be attached as needed. If the company would like to delegate authority to multiple positions, attach additional pages as needed.
- II. 2. This field is required if the company is delegating authority to a specific individual, rather than a position. Provide the name of the individual that will possess the delegated authority. Check one or both boxes indicating which authority will be delegated to the listed individual. Other specifications or limitations may be provided, per the company's preference. Additional pages may be attached as needed. If the company would like to delegate authority to multiple individuals, attach additional pages as needed.

Section III. This field is required in addition to Section I only if the company is amending a Certificate of Company Authority which is already on file with the Department of State.

Check the box. List the date that the Certificate of Company Authority that is being amended became effective. List verbatim, the content of the amendment. Additional pages may be attached as needed.

Section IV. This field is required in addition to **Section I** only if the company is canceling a Certificate of Company Authority which is already on file with the Department of State.

Check the box. List the date that the Certificate of Company Authority that is being canceled became effective.

Signature and Verification

An authorized representative of the limited liability company must sign the Certificate of Company Authority (or amendment or cancellation thereto). Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Return document by mail to:	Certificate of Denial - Limited Liability Company
	DSCB:15-8833
Name	(2/2017)
Address	
Audios	
City State Zip Code	
Return document by email to:	
	0000
Fee: \$70	prior to completing.
In compliance with the requirements of the applicable denial of limited liability company authority), the undersigned liability company authority hereby states that:	e provisions of 15 Pa.C.S. § 8833 (relating to certificate of d person desiring to effect a certificate of denial of limited
1. The name of the limited liability company is:	
2. The current registered office address as on file with the	e Department of State. Complete part (a) OR (b) - not both
	Department of State. Complete part (a) OR (b) - not both
(a)	y State Zip County
·	,
(b) c/o:	County
3. The date the Certificate of Authority to which this den	sial partains was filed.
3. The date the Certificate of Authority to which this den	Date (MM/DD/YYYY)
4. I deny the grant of authority in the Certificate of Authority	
IN TESTIMONY WHEREOF, the undersigned has caused thi Authority to be signed thereof this day of	s Certificate of Denial of Limited Liability Company, 20
	Name of Limited Liability Company
	Signature
<u> </u>	Tid
	Title

DSCB:15-8833 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used by a person named in a filed Certificate of Authority pertaining to a limited liability company to deny such authority. The Certificate of Denial operates as a restrictive amendment to the Certificate of Company Authority and a certified copy may be recorded by the company or the person that delivered the Certificate of Denial to the Department of State for filing. The Certificate of Denial affects only the authority of a person to bind a company with respect to persons that are not partners.

Applicable Law

For relations of members and managers to persons dealing with limited liability company, in general, see 15 Pa.C.S. §§ 8831-8835. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability company. The name on this line must match exactly the company name as on file with the Department at the time the Certificate of Denial of Company Authority is submitted for filing. This field is required.
- 2. Current address. The address provided must be the company's registered office address on file with the Department of State at the time the Certificate of Denial of Company Authority is submitted for filing. This field is required.

Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.

- 3. This field should give the date the Certificate of Authority to which the denial pertains was filed in the Department of State. This field is required.
- 4. Mandatory statement. This field is required.

Signature and Verification

A Certificate of Denial of Company Authority by a person must be signed by that person. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Return document by mail to:	Certificate of Dissolution Domestic Limited Liability Company DSCB:15-8872(b)(2)(i) (2/2017)		
Address City State Zip Code Return document by email to:	8872B2I		
Read all instructions	prior to completing.		
Fee: \$70			
Caution: This form does not end the existence of the limited l from the rolls of active associations in the records of the Depar Certificate of Termination).	iability company or remove the limited liability company rtment. Compare to DSCB:15-8872(f) (relating to		
In compliance with the requirements of the applicable p certificate of dissolution), the undersigned limited liability constates that:			
1. The name of the limited liability company is:			
2. The current registered office address as on file with the Dep	partment of State. Complete part (a) OR (b) – not both:		
(a)			
•	State Zip County		
(b) c/o:Name of Commercial Registered Office Provider	County		
3. The company is dissolved.			
IN TESTIMONY WHEREOF, the undersigned limited liabilit signed by a duly authorized representative thereof this	y company has caused this Certificate of Dissolution to be day of, 20		
	Name of Limited Liability Company		
	Signature		

DSCB:15-8872(b)(2)-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

A dissolved limited liability company shall wind up its activities and affairs and the company continues after dissolution only for the purpose of winding up. In winding up its activities and affairs, a limited liability company shall discharge the company's debts, obligations and other liabilities, settle and close the company's activities and affairs, and marshal and distribute the assets of the company. It may deliver to the Department of State for filing a Certificate of Dissolution.

The term "dissolution" indicates the beginning of the end for unincorporated associations such as partnerships and limited liability companies. The end itself is labeled "termination." See 15 Pa.C.S. § 8872(f).

A Certificate of Dissolution will not serve to remove the limited liability company from the rolls of active associations in the records of the Department. Upon the filing of a Certificate of Dissolution, the limited liability company may preserve the company's activities, affairs and property as a going concern for a reasonable time; prosecute and defend actions and proceedings, whether civil, criminal or administrative; transfer the company's property; settle disputes by mediation or arbitration; and perform other acts necessary or appropriate to the winding up.

Applicable Law

For dissolution, winding up and termination of limited liability companies, in general, see 15 Pa.C.S. §§ 8871-8878. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

(1) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability company as on file with the Department of State. This field is required.
- 2. Current address. The address provided must be the limited liability company's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Certificate of Dissolution is submitted for filing. This field is required.
- 3. Mandatory statement. This field is required.

Signature and Verification

An authorized representative of the limited liability company must sign the Certificate of Dissolution. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects.

This field is required.

N A	Return document by mail to: fame ddress ity State Zip Code Return document by email to:	Certificate of Termination Domestic Limited Liability Company DSCB:15-8872(f) (rev. 2/2017)
	Read all instructions prior to completing. This form may be	be submitted online at https://www.corporations.pa.gov/ .
Fe	e: \$70	
	mination), the undersigned limited liability company, desiri	
1.	The name of the limited liability company is:	
2.	The current registered office address as on file with the De	partment of State. Complete part (a) OR (b) - not both:
	(a) Number and street City	State Zip County
	(b) c/o:	
	Name of Commercial Registered Office Provider	County
3.	Check one of the following:	
	☐ All debts, obligations and other liabilities of the limite	ed liability company have been paid and discharged.
	Adequate provision has been made for the payment are the limited liability company.	nd discharge of the debts, obligations and other liabilities of
4.	All the remaining property and assets of the limited liabili accordance with their respective rights and interests.	ity company have been distributed among its members in
5.	Check one of the following:	
	☐ There are no actions pending against the limited liabil	lity company in any court.
	Adequate provision has been made for the satisfaction liability company in any pending action.	n of any judgment that may be entered against the limited
6.	The limited liability company is terminated.	
	TESTIMONY WHEREOF, the undersigned limited liability and by a duly authorized representative thereof this	ty company has caused this Certificate of Termination to be day of, 20
		Name of Limited Liability Company
		, , ,
		Signature
		-
		Title

DSCB:15-8872(f)-Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction.

The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents shall be mailed to the address stated above.

Who should file this form?

When all debts, obligations and other liabilities of the limited liability company have been paid and discharged or adequate provision has been made therefor and all of the remaining property and assets of the company have been distributed to the members, a domestic limited liability company shall execute a Certificate of Termination and deliver it to the Department of State for filing, along with the certificates required by 15 Pa.C.S. § 139 (relating to tax clearance of certain fundamental transactions).

A Certificate of Termination will serve to remove the limited liability company from the rolls of active associations in the records of the Department. Upon the filing of a Certificate of Termination, the existence of the limited liability company shall cease, except for the purpose of legal actions, other proceedings and appropriate action as provided by law.

Applicable Law

For dissolution, winding up and termination of limited liability companies, in general, see 15 Pa.C.S. §§ 8871-8878. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) Tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth as described in the following paragraph.
- (2) Any necessary governmental approvals.

Tax clearance certificates:

A domestic limited liability company may not file a Certificate of Termination unless the document is accompanied by tax clearance certificates from the Department of Revenue and the Department of Labor and Industry evidencing the payment by the association of all taxes and charges due the Commonwealth required by law. To obtain these clearance

certificates, a Form REV-181 (Application for Tax Clearance Certificate) must be completed and submitted to both the Department of Revenue and the Department of Labor and Industry. The application and instructions may be downloaded from the Department of Revenue website at www.revenue.pa.gov or obtained by calling 717-783-6052.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability company as on file with the Department of State. This field is required.
- 2. Current address. The address provided must be the limited liability company's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Certificate of Termination is submitted for filing. This field is required.
- 3. Check only one of the boxes, based on the status or situation of the terminating company. This field is required.
- 4. Mandatory statement. This field is required.
- 5. Check only one of the boxes, based on the status or situation of the terminating company. This field is required.
- 6. Mandatory statement. This field is required.

Signature and Verification

An authorized representative of the limited liability company must sign the Certificate of Termination. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects.

This field is required.

Return document by mail to:	Voluntary Termination [Never Transacted Business] Domestic Limited Liability Company		
Name	DSCB:15-8878 (2/2017)		
Address	100000000000000000000000000000000000000		
City State Zip Code			
Return document by email to:	8878		
Read all instructions	prior to completing.		
Fee: \$70			
In compliance with the requirements of the applicable p termination by members or organizers for a limited liability co desiring that the company should be terminated, hereby states	mpany that has never transacted business), the undersigned		
1. The name of the company is:			
2. The current registered office address of the company as on Complete part (a) OR (b) – not both:	file with the Department of State.		
(a)	State Zip County		
	1		
(b) c/o:Name of Commercial Registered Office Provider	County		
3. The company has never transacted business or held assets of			
4. The amounts, if any, actually paid in as capital contribution have been returned to those entitled to the return of the amounts.			
5. A majority of the organizers or a majority in interest of the	members elect that the company be terminated.		
6. Check one of the following:			
☐ All liabilities of the company have been discharged.			
☐ Adequate provision has been made for the payment of	the liabilities of the company		
IN TESTIMONY WHEREOF, at least a majority of the organ named company has hereunto set their hands this day			
	Signature		
	Signature		
	Signature		

DSCB:15-8878 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70, made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

This form may be used to terminate a domestic limited liability company that has never transacted business or held assets other than money received as capital contributions.

If a domestic limited liability company has transacted business, it must use form DSCB:15-8872(f) (Certificate of Termination - Domestic Limited Liability Company) to terminate the company.

Applicable Law

For termination, dissolution, and winding up requirements of a limited liability company, in general, see 15 Pa.C.S. §§ 8871-8878. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Name. Give the exact name of the company. The name on this line must match exactly the association name as shown in Department's records at the time the Voluntary Termination [Never Transacted Business] is submitted for filing. This field is required.
- 2. Address. The address provided must be the association's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Voluntary Dissolution [Never Transacted Business] is submitted for filing. This field is required.
- 3. Mandatory statement. This field is required.
- 4. Mandatory statement. This field is required.
- 5. Mandatory statement. This field is required.
- 6. Check the appropriate box. A response to this field is required.

Signature and Verification

The Voluntary Termination [Never Transacted Business] must be executed by a majority of the organizers or a majority in interest of the members. When the company has more than three executing organizers or members, additional signature lines should be added as appropriate. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

Attachments

The following, in addition to the filing fee, shall accompany this form:

(1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).

Return document by mail to: Name		Annual Benefit Report Benefit Limited Liability Company DSCB:15-8898 (2/2017)		
Address		_	,	
City	State Zip Code	—		
	ırn document by email to:			
Ketu		= 1		
Fee: \$7		ons prior to completing.		
benefit	In compliance with the requirements of 15 Pa.C.S. company hereby states that:	5. § 8898 (relating to annual benefit report),	the undersigned	
1.	The name of the limited liability company is:			
2.	Complete part (a) or (b) – not both:			
	(a) The address of this limited liability company's c	current registered office in this Commonwe.	alth is	
	Number and Street City	State Zip	County	
	(b) The name of this limited liability company's cor		county of venue is	
	c/o:Name of Commercial Registered Office Provide	der Co	ounty	
3.	A narrative description of: (i) the ways in which the benefit company pursued general public benefit was created;	d general public benefit during the year and	the extent to which	
	(ii) the ways in which the benefit company pursued states is the purpose of the benefit company to creat created;			
	(iii) any circumstances that have hindered the crea benefit; and	ation by the benefit company of general or s	specific public	
	(iv) the process and rationale for selecting or change	ging the third-party standard used to prepare	e the benefit report.	

DSO	¬R∙	15.	- የዩ	QQ	_ 2

4.	An assessment of the overall social and environmental performance of the benefit company against a third-par standard applied consistently with any application of that standard in prior benefit reports or accompanied by explanation of the reasons for any inconsistent application.	
5.	A statement of any connection between the organization that established the third-party standard, or its direct officers or any holder of 5% or more of the governance interests in the organization, and the benefit company its members, managers or officers or any holder of 5% or more of the outstanding interests in the benefit company, including any financial or governance relationship which might materially affect the credibility of the use of the third-party standard.	or
IN Rej	TESTIMONY WHEREOF, the undersigned benefit limited liability company has caused this Annual Benefit port to be signed by a duly authorized officer this day of, 20	
	Name of Company	
	Signature	
	Title	

DSCB:15-8898 - Instructions

Pennsylvania Department of State Bureau of Corporations and Charitable Organizations P.O. Box 8722 Harrisburg, PA 17105-8722 (717) 787-1057

Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70.

Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

Every domestic limited liability which is a benefit company must deliver to each member an annual benefit report. Concurrently with the delivery of the benefit report to members, the benefit company must deliver a copy of the benefit report to the Department of State for filing

Applicable Law

For annual benefit report requirements, see 15 Pa.C.S. § 8898. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes.

Definitions

A benefit company is a limited liability company that has elected to become subject to Chapter 88, Subchapter I of the Pennsylvania Uniform Limited Liability Company Act of 2016. A benefit company shall have a purpose of creating general public benefit. This purpose is in addition to its purpose under 15 Pa.C.S. § 8818(b) (relating to characteristics of limited liability company). The certificate of organization of a benefit company may identify one or more specific public benefits that it is the purpose of the benefit company to create in addition to its general public benefit purpose under 15 Pa.C.S. § 8894(a) and its purpose under 15 Pa.C.S. § 8818(b).

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- 1. Give the exact name of the limited liability company. The name on this line must match exactly the association name as shown in Department's records at the time the Annual Benefit Report is submitted for filing. This field is required.
- 2. Current address. The address provided must be the company's registered office address (a) or Commercial Registered Office Provider (b) as on file with the Department of State at the time the Annual Benefit Report is submitted for filing. This field is required.
- 3 5. See 15 Pa.C.S. § 8898 for more information. Additional pages may be attached as needed.

A benefit company may change from year to year the standard it uses for assessing its performance. But if a benefit company uses the same standard for assessing its performance in more than one year, the standard must either be applied consistently or the benefit company must provide an explanation of the reasons for any inconsistent use of the standard.

Fields 3-5 are required with the exception that any financial or proprietary information may be omitted from the benefit report as filed with the Department of State.

Signature and Verification

An authorized representative of the benefit company must sign the Annual Benefit Report. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. **This field is required.**

Return document by mail to: Name		Registration of Fictitious Name DSCB:54-311 (rev. 2/2017)		Name	
Address					
City Retu	ırn document by email to:	State Zip Code	311		
Rea	ad all instructions prior to	o completing. This form may b	oe submitted online at <u>l</u>	https://www.corpo	orations.pa.gov/.
Fee: \$7	70 🔲 I qua	lify for a veteran/reservist-own	ned small business fee	exemption (see ins	structions)
		irements of 54 Pa.C.S. § 311 er 54 Pa.C.S. Ch. 3 (relating to			l entity(ies) desiring
1.	The fictitious name is:				
_	or through the fictitious	e character or nature of the best name is: number and street, if any, of			
	is not acceptable):	number and street, if any, or	ine principal place of c	vasiness (1.0. Dox	a dione
N	Jumber and street	City	State Z	ip Co	unty
4.	The name and address, business is: Name	including number and street, Number and Street	if any, of each individu	al interested in the	e Zip
-					
-					

DSCB:54-311-2

5. Each entity, other than an individual, interested in such business is (are):					
Name	Form of Organization	Organizing Jurisdiction			
Principal Office Address					
PA Registered Office, if any					
Name	Form of Organization	Organizing Jurisdiction			
Principal Office Address					
PA Registered Office, if any					
6. The applicant is familiar with the understands that filing under the F the fictitious name.	provisions of 54 Pa.C.S. § 332 (rela Fictitious Names Act does not create				
7. (Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):					
IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this day of					
Individual Signature	Inc	lividual Signature			
Individual Signature	In	dividual Signature			
Entity Name		Entity Name			
Signature		Signature			
Title		Title			

DSCB:54-311-Instructions

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
P.O. Box 8722
Harrisburg, PA 17105-8722
(717) 787-1057
Website: www.dos.pa.gov/corps

Instructions for Completion of Form:

A. Typewritten is preferred. If handwritten, the form shall be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70 made payable to the Department of State. Checks must contain a commercially pre-printed name and address. Filers requesting a veteran/reservist-owned small business fee exemption should attach proof of the veteran's or reservist's status to the Registration of Fictitious Name form when submitted. For more information on the fee exemption, see Fees and Payments.

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
 - (1) Any necessary copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (2) Any necessary governmental approvals.
- D. For general instructions relating to fictitious name registration see 19 Pa. Code Subch. 17C (relating to fictitious names). These instructions relate to such matters as voluntary and mandatory registration, general restrictions on name availability, use of corporate designators, agent for effecting amendments, etc., execution, official advertising when an individual is a party to the registration, and effect of registration and non-registration.
- E. The name of a commercial registered office provider may not be used in Paragraph 3 in lieu of an address.
- F. Insert in Paragraph 5 for each entity which is not an individual the following information: (i) the name of the entity and a statement of its form of organization, e.g., corporation, general partnership, limited partnership, business trust, (ii) the name of the jurisdiction under the laws of which it is organized, (iii) the address, including street and number, if any, of its principal office under the laws of its domiciliary jurisdiction and (iv) the address, including street and number, if any, of its registered office, if any, in this Commonwealth. If any of the entities has an association which has designated the name of a commercial registered office provider in lieu of a registered office address as permitted by 15 Pa.C.S. § 109, the name of the provider and the venue county should be inserted in the last column.
- G. Every individual whose name appears in Paragraph 4 of the form <u>must sign</u> the form exactly as the name is set forth in Paragraph 4. The name of every other entity listed in Paragraph 5 shall be signed on its behalf by an officer, trustee or other authorized person. See 19 Pa. Code § 13.8(b) (relating to execution), which permits execution pursuant to power of attorney. A copy of the underlying power of attorney or other authorization should not be submitted to, and will not be received by or filed in, the Department.
- H. An entity (which includes an individual) that registers a fictitious name is required by 54 Pa.C.S. § 311(g) to advertise its intention to file or the filing of an application for registration of fictitious name. Proofs of publication of such advertising should not be submitted to the Department, and will not be received by or filed in the Department, but should be kept with the permanent records of the business.
- I. This form and all accompanying documents shall be mailed to the address stated above.

Return document by mail	to:	Registration or Renewal of		
Name		Unincorporated Association Name DSCB:54-502 (rev. 2/2017)		
Address				
City	State Zip Code		502	
Return document by emai	1 to:			
Read all instr	ructions prior to completing. This re and must be renewed annually bet			
Fee: \$70				
Check one:	☐ Initial registration	☐ Renewal of re	gistration	
	the requirements of 54 Pa.C.S. § 50 accorporated association, desiring to rating, hereby states that:			
1. The name to be re	gistered is:			
2. The address of the	e association is:			
Number and street	City	State Zip	County	
3. The length of time,	if any, during which the name has	been used by the applicant	t is:	
IN TESTIMONY WHERE Registration of Unincorpo	EOF, the undersigned domestic unitrated Association Name to be signe	ncorporated association hard by a duly authorized off	s caused this Application for icer this day of	
		Name of Domest	ic Unincorporated Association	
			Signature	
		· · · · · · · · · · · · · · · · · · ·	Title	

DSCB:54-502-Instructions

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
P.O. Box 8722
Harrisburg, PA 17105-8722
(717) 787-1057
Website: www.dos.pa.gov/corps

General Information

Typewritten is preferred. If handwritten, the form must be legible and completed in black or blue-black ink in order to permit reproduction. The nonrefundable filing fee for this form is \$70. Checks should be made payable to the Department of State. Checks must contain a commercially pre-printed name and address.

This form and all accompanying documents, including any necessary governmental approvals, shall be mailed to the address stated above.

Who should file this form?

Any domestic unincorporated association seeking to register an association name for a period of up to one year may file this form. This form is only to be used when the association is not otherwise required to be formed or organized by another type of filing. This registration will NOT formally incorporate, organize or form an association. See the Department's Registration Forms page for necessary forms. This form also will NOT register a d/b/a or fictitious name. Use DSCB:54-311 (Registration of Fictitious Name).

Available names will be registered though December 31 of the year in which the registration is filed. Registrations may be renewed annually between October 1 and December 31 for the following calendar year. Initial registrations filed between October 1 and December 31 will expire on December 31 of the following calendar year.

Applicable Law

For registration of name of unincorporated association, 54 Pa.C.S. § 502; for names, in general, 15 Pa.C.S. §§ 201-209. Statutes are available on the Pennsylvania General Assembly website, www.legis.state.pa.us, by following the link for Statutes

Association Name Requirements

Generally, the name of an association may not be the same as the name of another association which is already on the records of the Department of State. A name registered using this form may NOT use certain designators indicating it is incorporated or has limited liability (e.g. Inc., LLC, Limited, etc.)

Restricted word and/or approvals:

Association names may not contain words, phrases or abbreviations prohibited or restricted by statute or regulation, unless in compliance with the restriction, generally with the consent or approval of a government agency, board or commission. These may include certain professional and occupational boards or commissions of the Bureau of Professional and Occupational Affairs, the Department of

Education, the Department of Banking and Securities, the Insurance Department or the Public Utility Commission. There are also words and abbreviations that may be restricted, prohibited, or may be permitted in certain instances as provided in various federal statutes, Attorney General opinions and Bureau regulations.

Attachments

The following, in addition to the filing fee, shall accompany this form:

- (1) Any *necessary* copies of form DSCB:19-17.2 (Consent to Appropriation of Name).
 - (2) Any necessary governmental approvals.

Form Instructions

Enter the name and mailing address to which any correspondence regarding this filing should be sent. This field must be completed for the Bureau to return the filing. If the filing is to be returned by email, an email address must be provided. An email will be sent to address provided, containing a link and instructions on how a copy of the filed document or correspondence may be downloaded. Any email or mailing addresses provided on this form will become part of the filed document and therefore public record.

Indicate whether the application is an initial registration or whether the application is being renewed. Renewals must be submitted for filing between October 1 and December 31 for the following calendar year.

- 1. Give the exact name of the association. This should include the exact spelling and punctuation. This field is required.
- 2. The street and mailing address of the association's principal office. This address should be located in this Commonwealth. Post office boxes are not acceptable for any address. Under 15 Pa.C.S. § 135(c) (relating to addresses), an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address. This field is required.
- 3. The length of time which the registrant has used the name. An exact date is preferred but not required.

Signature and Verification

An authorized representative of the domestic association must sign this form. Signing a document delivered to the Department for filing is an affirmation under the penalties provided in 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that the facts stated in the document are true in all material respects. This field is required.

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