

STATE OF ALABAMA

AMENDMENT TO STATEMENT OF AUTHORITY OF A FOREIGN LIMITED PARTNERSHIP (FLP)

PURPOSE: To amend the registration of a foreign partnership within 90 days after the change of facts described in the registration/filing pursuant to Section 10A-1-7.06 of the Code of Alabama 1975.

INSTRUCTIONS: Mail 2 copies of this completed form along with a self-addressed, stamped envelope to:

*Secretary of State, Business Services, P.O. Box 5616, Montgomery, Alabama 36103.

*Include a check, money order, or credit card payment for the \$100.00 processing fee.

*The request is only accepted via mail or courier and will not be accepted via email.

*You may file the amendment online in the time it takes to type this request.

*Your filing will not be indexed if the credit/debit card does not authorize and will be removed from the index if the check is dishonored (\$30 fee).

This form must be typed and will not be accepted via email.

- 1. NOT REQUIRED: Delayed effective date ... MUST be after date of receipt by Alabama Secretary of State's Office and not more than 90 days after signing of this document.
2. Alabama Entity ID Number (Format: 000-000-000): ... TO OBTAIN ID NUMBER, go to our website at www.sos.alabama.gov, click on Business Services (below picture), click on Business Entity and Name Search, click on Entity Name, enter the name of the entity in the appropriate box, and enter. Click on the number and verify that this is the correct entity. This step is strongly recommended.
3. The legal name of the foreign entity as currently registered with the Alabama Secretary of State:
4. If amending the name of the foreign entity for use in Alabama, a copy of the name reservation certificate from the Office of the Alabama Secretary of State must be attached (must be acquired prior to submitting Amendment).
5. The name of the foreign entity has been legally changed to (insert "no change" if not applicable):
6. The name of the foreign entity for use in Alabama only if different from the legal name*:

*A fictitious name may be used only if the legal name is not available for use in Alabama or the name does not contain the word "Limited" or the abbreviation "Ltd." or the phrase "Limited Partnership" or the abbreviation "L.P." or "LP" (10A-1-7.07).

(For SOS Use Only)

This form was prepared by: (type name and full address)

Empty box for preparer name and address.

Large empty box for Secretary of State use only.

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- 7. If a fictitious name is used, the undersigned certifies the resolution of the LP’s governing authority to adopt the fictitious name for use in Alabama and affirms the Authority to make such a certification under 10A-1-7.07.
- 8. Detail any amendment to the registration information (may include, name change, change of principal address, change of jurisdiction of formation, general partners) – if more space is required you may enter See Attached and attach the details:

If the registered agent/registered office address in Alabama has changed, you will need to file a Change of Registered Agent or Registered Office by Entity – the signature of the new agent is required on that form. The form may be obtained at www.sos.alabama.gov under the Business Services tab (below picture), Business Forms, then scroll down to the Registered Agent and/or Registered Office Changes category.

- 9. The undersigned certify that this foreign entity is a valid existing limited partnership in the state/country of formation.
- 10. The undersigned signatory authority certifies that the signature(s) meet the requirements of the *Code of Alabama 1975*, Section 10A-9A-2.03 to include, but not be limited to declarations regarding accuracy and penalty of perjury, and any copy requirements.

One or more partners may sign.

| | |
|-------------------|--|
| <hr/> <p>Date</p> | <hr/> <p>Typed name of partner authorized</p> |
| | <hr/> <p>Signature of above stated authority</p> |

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| <hr/> <p>Date</p> | <hr/> <p>Typed name of partner authorized</p> |
| | <hr/> <p>Signature of above stated authority</p> |

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|-------------------|--|
| <hr/> <p>Date</p> | <hr/> <p>Typed name of partner authorized</p> |
| | <hr/> <p>Signature of above stated authority</p> |

Secretary of State Credit Card or Prepaid Payment Option/Return/Hold Sheet: If you do not send an acknowledgement copy and a pre-addressed postage paid envelope with the filing or return email address, you will not receive a receipt from the Secretary of State's Office. Hold for pickup request will have the receipt attached. The document of record will be stamped showing the receipt of the filing fee but will not show convenience fees (generally these fees are between 2% and 5% of the total charge).

Information MUST be typed or filing will be returned without review.

Entity Name: _____

AL Entity ID #, required for all filings other than formation/registration: _____ - _____ - _____
(ex: 000-000-000)

Service Requested: \$100.00 Amendment filing fee

Hold at Front Desk for pick-up by: _____

There is no notification service/call for pick-up.

Choose one of the following:

_____ Check/money order is attached-Please make one check payable for each filing to the Alabama Secretary of State. Do not use one check for multiple filings.

_____ Charge fees to prepaid account: Account Number _____
and Account Name _____

Typed Name & Signature of Authorized Individual on Account

_____ Credit Card Type: _____ (Visa, MC, Discover & AmEx)

Card Number: _____ Expiration Mo/Yr.: ____/____ (MM/YY)

Card Holder Name: _____

Complete Billing Address: _____
Street or PO Box

City State Zip

Signature of Card Holder: _____

MUST be Signature of Card Holder