CERTIFICATE OF WEST VIRGINIA LIMITED PARTNERSHIP

Form LP-1 Rev. 6/5/2019

FILE ONE ORIGINAL

(Two if you want a filed stamped copy returned to you.)

FILING FEE: \$100

West Virginia Secretary of State

Business & Licensing Division Tel: (304)558-8000 Fax: (304)558-8381

Website: www.wvsos.gov

* Fee Waived for Veteran-owned organization		Control #		
*** We, the undersigned, hereby for	m a Limited Partnership accordin	ng to the provisions of We	est Virginia Code §47-9. **	*
 The name of the limited partnership shall Section 1 of instructions for name requirem 				
2. The address of the principal office is:	Street:			
	City:	State:	Zip Code:	
Located in the County of (<u>required</u>):	County:			
3. The principal mailing address is:	Street:			
	City:	State:	Zip Code:	
4. The address of the office in West Virginia at which a list of names and addresses of the limited partners and their capital contributions will be kept (required):	Street:			
	City:	State:	Zip Code:	
Located in the County of:	County:			
5. The name and mailing address to whom notice for service of process is to be sent, if any, is:	Name:			
	Street:			
	City:	State:	Zip Code:	
6. E-mail address where business corresp	oondence may be received:			
7. Website address of the business, if any	y (ex: yourdomainname.com):			
8. Do you own or operate <u>more than on</u> <u>business in West Virginia</u> ?	Yes * Answer a. and b. be	elow. No	Decline to answer	
If "Yes" a. How many businesses?	b. Located in how ma	any West Virginia counties?		
 a. The business purpose (activity) in which will be conducted in West Virg Verification of Eligibility (Form VC CHECK BOX below). 	ginia.]: *NOTE - "Professional"	business organizations 1	nust attach to this applicati	on the

<u>Professional business organizations</u>: <u>CHECK BOX</u> indicating you have attached the state licensing board **Verification of Eligibility** (Form <u>VOE</u>) to this statement of registration if your profession meets the requirements as defined by <u>Chapter 30</u> of the WV Code. *See* Section 9 of the attached instructions for a list of professions. <u>Your application will be rejected if the VOE signed by the board is not attached.</u>

organization have four of have four of Contact and Contact property, the understanding understanding the contact property of t	on. See attached instructions to (4) consecutive years of Annual or (4) consecutive ye	hereby affirm under penalty of perjuiving Virginia Code §47-9, and that the factorial virginia Code §47-9.	for this waiver. In a nization's initial form artner per West Vir	addition, a "veteranation [see WV Code rginia Code §47-9- Phone: nip has determined	a "veteran-owned" entity wis 59-1-2a(m)].
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organizatio	on. See attached instructions t	to determine if the organization qualifies	for this waiver. In a	addition, a "veteran	a "veteran-owned" entity w
					SCIVICE TECOTOS
				v/veterans/military	-service-records
			Toll free: 1-86-NA Phone: 314-801-0	ARA-NARA or 1-8 1800	366-272-6272
		contacting:	St. Louis, MO 63		
		of your Veterans Affairs Form DD214 by	Military Personn 1 Archives Drive	ici Recofus	
No		You may obtain a copy		nel Records Cente	r
o In the		business, at least fifty-one percent (51 CHECK BOX indicatin	%) of the stock is useg you have attached	Veteran Affairs For	em DD214
2. A "vete	ran-owned business" mea	ns a business that meets one of the fo b) unconditionally owned by one or m	llowing criteria:		
	ollowing criteria per West V	/irginia Code §59-1-2a: scharged or under honorable conditio	ns and		
Effective J	ULY 1, 2015, to meet the 1	requirements for a "veteran-owned"	organization, the er	ntity filing the regis	stration must
Is the orga	anization a "veteran-owned	d" organization?			
Any other	matters the partners deterr	nine to include in the certificate are (a	add additional page	s if necessary):	
additional	pages if necessary - <u>DO NO</u> <u>Name</u>	OT list "limited partners."): Mailing Address	<u>City</u>	<u>State</u>	Zip Code
	-	es) of each general partner is (inform	nation is required fo	or each general nar	tner: attach
	Proceed to Section 10.]	∞ .]			
□ No [I	associated requisite filing fee	nancier pursuant to WV Code §46A-6N. leted copy of the required Application for	You are also affirmin	g that you have inclu	ided with this
— □ No ∏		icant affirms the above purpose includes			

document he or she knows is false in any material respect and knows that the document is to be delivered to the secretary of state for filing is guilty of a misdemeanor and, upon conviction thereof, shall be fined not more than one thousand dollars or confined in the county or regional jail not more than one year, or both.

Important Note: This form is a public document. Please do NOT provide any personal identifiable information on this form such as social security

number, bank account numbers, credit card numbers, tax identification or driver's license numbers.

INFORMATION AND INSTRUCTIONS FOR FILING CERTIFICATE OF LIMITED PARTNERSHIP

The West Virginia Code Chapter 47, Article 9 governs the formation and operation of limited partnerships.

Are any types of businesses prevented from operating as limited partnerships?

West Virginia Code §47-9-6 precludes limited partnerships from carrying on the business of banking, brokerage or making insurance. Otherwise, they may engage in any business in which a partnership may engage.

What's the difference between a partnership and a limited partnership?

Registration - A "partnership" is "an association of two or more persons to carry on as co-owners of a business for profit" according to WV Code §47B-2-2. A general partnership can exist without any registration, and even without specific intent of the partners to form a partnership. A partnership may become a limited partnership, on the other hand, only by filing with the Secretary of State a "Certificate of Limited Partnership" (for in State companies) or a "Statement of Registration of Limited Partnership" (for out-of-State companies). A limited partnership consists of one or more general partners and one or more limited partners. The names of the general partners are required to be included in the certificate or Statement, but the names of the limited partners are not.

Liability - In a general partnership, all partners are liable jointly and severally for all obligations of the partnership unless otherwise agreed by the claimant or provided by law. [§47B-3-6(a)] In a limited partnership, a limited partner is generally not liable for the obligations of the partnership unless "he is also a general partner or ... takes part in the control of the business..." or "knowingly permits his name to be used in the name of the limited partnership." [§47-9-19]

What is necessary to form a limited partnership?

Partnership Agreement - Although a written agreement is not required by law, it can be the most important legal document partners have. Through the written agreement, partners can determine the partnership's rules relating to admission of partners, voting, rights, and powers of partners, obligations for contributions, sharing of profits and losses, sharing of distributions, withdrawal or partners, events causing dissolution and other matters. Before filing the partnership certificate or registration, read the provisions of WV Code Chapter 47, Article 9 or obtain legal advice about this agreement. Once all your filings are made, the limited partnership is "in business" and only the law and your agreement will govern how issues can be resolved.

Filing with the Secretary of State - A limited partnership must file with the Secretary of State either on standard forms or in a document which contains all of the required information laid out in approximately the same order as the form. An in-State company files a "Certificate of Limited Partnership," Form LP-1. An out-of-State limited partnership files a "Statement of Registration," Form LP-2. The limited partnership will continue its existence in West Virginia until it is voluntarily dissolved or withdrawn through the proper filings.

What other filing requirements will there be?

Other Agencies - All forms of business must obtain a business franchise certificate from the Department of Tax & Revenue before doing business. Those with employees must register with Employment Security and Workers Compensation. Certain types of business require additional licenses or permits for certain activities.

Annual Report - Each limited partnership will be required to file an annual report with the Secretary of State's office due by the close of business July 1. Every domestic and foreign limited partnership must pay the \$25 annual report fee to avoid a late fee penalty and possible administrative dissolution or revocation.

COMPLETING THE WEST VIRGINIA CERTIFICATE OF LIMITED PARTNERSHIP APPLICATION

Section 1. The name of the limited partnership:

- a. must include one of the following required name endings: "Limited Partnership" or one of its abbreviations, "LP" or "L.P."
- b. may <u>not</u> contain the name of a limited partner unless the person or corporation is also a general partner, or unless the business has been carried on under the name before that limited partner was admitted.
- c. may not be the same and must be distinguishable from any other business entity which has been reserved or filed; and
- d. **may not** include the word "engineer" or related words unless the purpose is to practice professional engineering and one or more of the partners is a registered professional engineer.
- **Section 2.** List the **principal office** of the limited partnership.
- **Section 3.** Please be sure the address includes an address necessary to receive mail.
- Section 4. A limited partnership is required to maintain continuously an office within the State, which need not be its place of business. WV Code §47-9-5 lists the records which are required to be kept there. Those include lists of general and limited partners, copies of the certificate of limited partnership or amendment, any power of attorney, tax returns, partnership agreements, financial Statements and other matters. Consult the law for specifics.
- Section 5. A limited partnership may wish to maintain a person (agent) to whom notice of process may be mailed. If the agent changes, you must notify the Secretary of State of such change.
- Section 6. List an e-mail address (yourname@domainname.com) where you can receive important e-mail notifications (e.g., Annual Report notices).
- Section 7. List the website address (domainname.com) of the business, if any. DO NOT list a physical mailing address.

- Section 8. Indicate whether or not you own or operate more than one business in West Virginia. If "Yes"...
 - a. List the total number of businesses in West Virginia in the space provided.
 - b. List the total number of counties in West Virginia in which the businesses conduct operations.
- Section 9. a. Provide a <u>brief description of the business activity in which the partnership engages</u>. The partnership may include other matters in the registration statement by attaching an additional sheet. *NOTE "Professional" business organizations must attach to this application the Verification of Eligibility (Form VOE) authorized by your professional state licensing board (*see list of professions below*).

Important Professional business organizations: CHECK BOX indicating you have attached Verification of Eligibility (Form VOE) to this application if your profession meets the requirements as defined by Chapter 30 of the WV Code. The Secretary of State cannot complete your filing until verification is received from the appropriate state licensing board. Your application will be rejected if the VOE is not attached.

Attorneys-at-law	[Article 2]	Physicians & Podiatrists	[Article 3]
Dentists	[Article 4]	Optometrists	[Article 8]
Accountants	[Article 9]	Veterinarians	[Article 10]
Architects	[<u>Article 12</u>]	Engineers	[Article 13]
Land Surveyors	[Article 13a]	Osteopathic Physicians & Surgeons	[Article 14]
Chiropractors	[<u>Article 16</u>]	Psychologists	[Article 21]
Social Workers	[Article 30]	Acupuncturists	[Article 36]

- b. If "No," proceed to Section 10. If "Yes," the above purpose includes any business activity conducted as a **consumer litigation financier**, pursuant to WV Code §46A-6N, the organization must register as a litigation financier by completing and submitting to Secretary of State an original copy of the **Application for Registration as a Litigation Financier** (Form **LF-1**) and pay the associated requisite filing fee. If this applies to your organization, check the "Yes" box to include in your purpose the required statement that the organization shall be designated as a litigation financier.
- Section 10. The names and addresses of all general partners are required by law. DO NOT list limited partners here.
- **Section 11.** If other matters are to be included, please add additional page(s).
- Section 12. Check the appropriate box indicating whether or not the organization is "veteran-owned." Effective JULY 1, 2015, the following criteria must be met in order to qualify as a "veteran-owned" entity: (1) veteran must be "honorably discharged or under honorable conditions;" and (2) if a publicly-owned entity, at least fifty-one per cent (51%) of the stock must be unconditionally owned by one or more veterans [see WV Code 59-1-2a(12)-(13)(A)(B)]. If "Yes," you must provide proof of veteran status by including with this application a copy of your Veteran Affairs Form DD214.
- Section 13. THE SIGNATURE OF EACH GENERAL PARTNER IS REQUIRED. Listing a contact person and phone number is optional, however, listing a contact in case of a problem with filing may help avoid possible rejection of the document.

ANNUAL REPORT NOTICE:

West Virginia Code 59-1-2a. requires every limited partnership (both for profit and non-profit) to file an annual report and pay the annual report filing fee between January 1 and July 1 of each year following the calendar year in which the business was registered with the Office of the Secretary of State. The \$25 annual report fee is waived for Veteran-owned entities for the following four (4) years after initial formation [see West Virginia Code 59-1-2a(m)]. Failure to file may result in revocation of the organization's legal authority to transact business in the state. Notification of the filing requirement will be sent, but the company is responsible for filing the annual report as required by West Virginia Code. You may file the annual report online at https://onestop.wv.gov. You must register a User Account Login ID and Password to create a personal "Filing Cabinet" to file the annual report.

FILING THE APPLICATION - ONE ORIGINAL REQUIRED - AND PAYING THE FEE

Send an additional original if you want a filed date-stamped copy returned to you at no additional cost.

The filing fee will consist of paying an initial registration fee. If requesting a certified copy, an additional fee of \$15 per certified copy is required.

	Registration fee - \$100
	* Veteran-owned entity registration FEE WAIVED - \$0
Registration fee*	[Registration fee is waived for "veteran-owned" entity effective July 1, 2015 per WV
	Code 59-1-2(j); Be sure to attach the veteran proof of status Veteran Affairs Form
	DD214 when claiming "veteran-owned" status.]
\$15 per certified copy: +	Expedite Fee is additional if requesting expedite service. See Customer Order Request form for
	more information.
Total fee: =	

**** Make your checks payable to West Virginia Secretary of State. ****

TEXT ALERTS: Stay up-to-date regarding filing deadlines and changes to business, charity, notary, private investigation, and security guard laws. To sign up, visit the Secretary of State online at **www.wvsos.gov** and select **Text Alerts**. Next, under the heading, "Choose SMS Subscription," click the down arrow and select "Business and Licensing." Then enter your ten-digit mobile phone number and your cellular carrier. Click *Subscribe*. This will allow you to get important information delivered right to your mobile phone. Please note, standard text messaging rates apply and you may unsubscribe at any time.

CHARITABLE REGISTRATION: If your company receives contributions, donations or grants, registration as a charitable organization may be required. Contact our office for more information or visit our web site at www.wvsos.gov.

CANCELLATION: A limited partnership is a legal entity which can only be dissolved through formal action by filing the necessary documents for cancellation - not by a letter or phone call. You remain liable for all taxes, assessments, fines, penalties and interest until you receive a certificate of cancellation from the Secretary of State. Contact us for more information.

Business & Licensing Division Tel: (304) 558-8000 Fax: (304) 558-8381

Website: www.wvsos.gov

Rev. 11/2022

Filing Submission Instructions - Business Division

IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORMS.

Please follow the instructions included with the application. Failure to include any of the required information on the form may cause the filing to be rejected.

All forms may be downloaded from our web site www.wvsos.gov.

SUBMIT THE COMPLETED APPLICATION WITH THE <u>CUSTOMER ORDER REQUEST</u> FORM TO ONE OF THE OFFICES BELOW. CHOOSE EXPEDITED OR STANDARD PROCESSING SERVICE. IF NOT USING THE CUSTOMER ORDER REQUEST FORM AND YOU ARE REQUESTING EXPEDITED SERVICE, YOU MUST INCLUDE THE WORD "EXPEDITE" AND THE LEVEL OF EXPEDITED SERVICE BEING REQUESTED (24-HOUR, 2-HOUR OR 1-HOUR) IN YOUR CORRESPONDENCE. BE SURE TO INCLUDE THE CORRECT ADDITIONAL EXPEDITED FEE. THIS FEE IS IN ADDITION TO THE REGULAR FILING FEE (SEE FEES BELOW).

CHOOSE ONE OF THE FOLLOWING PROCESSING SERVICES:

1 EXPEDITED SERVICE (24-hour, 2-hour and **1-hour**; *Requires standard filing fee plus additional expedite fee, *see below*)

Expedite Service *Fee EXPEDITED SERVICE requests may be submitted by:

24-Hour \$ 25.00 - E-mail to efilings@wvsos.com

2-Hour \$250.00 - Fax

1-Hour \$500.00 - Walk in delivery

2 STANDARD PROCESSING (5-10 business days)

Standard filing fees apply. STANDARD PROCESSING requests may be submitted by:

- E-mail to CorpFilings@wvsos.com

- Fax

- Walk in delivery (drop off service only filed within 5-10 business days)

INCLUDE PAYMENT:

Be sure to enclose the correct filing fee with your filing. If paying by credit card, be sure to include the <u>e-Payment Authorization</u> form with your filing. Your filing will be rejected if the payment is not included or if the e-Payment Authorization form is not included if paying by credit card.

SUBMIT COMPLETED FILING TO ONE OF THE BUSINESS CENTERS BELOW:

BUSINESS SERVICE CENTERS Standard and Expedited Filings

Charleston OfficeClarksburg OfficeOne-Stop Business CenterNorth Central WV Business Center13 Kanawha Blvd. West153 West Main StreetSuite 201Suite G- Third FloorCharleston, WV 25302Clarksburg, WV 26301

Phone: (304) 558-8000 Phone: (304) 367-2775 Fax: (304) 558-8381 Fax: (304) 627-2243

Hours: Mon. - Fri. 8:30a - 5:00p EST Hours: Mon. -Fri. 9:00a - 5:00p EST

Martinsburg Office

Eastern Panhandle Business Center

229 E. Martin Street Martinsburg, WV 25401 Phone: (304) 356-2654 Fax: (304) 260-4360

Hours: Mon. - Fri. 9:00a - 5:00p EST

Business & Licensing Division Tel: (304)558-8000 Fax: (304)558-8381

Website: www.wvsos.gov

Rev. 9/2018

Customer Order Request

SUBMIT THIS COMPLETED FORM WITH YOUR FILING.

READ CAREFULLY BEFORE SUBMITTING - **Expedite service is NOT AVAILABLE for the following filings:**

- >> Tax Department filings including Sole Proprietorships, General Partnerships, and Associations
- >> Dissolution or Withdrawal of Corporation, Voluntary Association or Business Trust

Order Processing Requested*	* * * Expedite Processing Requires Additional Fees * * *		
Standard Processing**	24-HOUR Expedite 2-HOUR Expedite 1-HOUR Expedite		
(Avg. processing turnaround	(additional \$25.00 fee included) (additional \$250.00 fee included) (additional \$500.00 fee included)		
5-10 business days)	Email to: eFilings@wvsos.com		
Email to: CorpFilings@wvsos.com	ALL Requests for Copies of documents email to: Copies@wvsos.gov		
**Standard Processing applications recei	ompleted and registered in the Secretary of State registration database. ved by E-MAIL or FAX must include the e-Payment Authorization form with credit card information. gh any Secretary of State office location requesting the filing be processed will be assessed a 24-HOUR		
Name of Entity:			
Return filing to: (Return Address)			
Contact Name:	Phone:		
Return Delivery Options: Email Email to:	or Fax options <u>do not</u> receive a copy via mail; must be ordered separately. Fax to:		
Hold for Pick Up Mail to	o Return Address above FedEx: Acct #		
Other (explain below):	UPS: Acct #		
Order Description (include items being ordered and fee breakdown):			
* PLEASE NOTE: Original paperwork is kept by this office. Include a copy of the original filing if you want a file stamped copy returned to you at no extra charge. Certified copy requests are an additional \$15 per certified copy being requested.			
Payment Method:			
Check/Money Order	Credit Card (Must attach e-Payment Authorization request form including payment information.)		
Cash (Do Not mail cash)	Pre-paid Acct #: Attach signed pre-paid slip.		

MAC WARNER Secretary of State State Capitol Building Charleston, WV 25305 Phone: (304) 558-6000 Website: www.sos.wv.gov

24-hour, 2-hour and 1-hour **Expedite Service Guidelines**

IMPORTANT: To ensure expedited service, please mark "EXPEDITE" in a conspicuous place at the top of the service request. Please indicate method of delivery.

24-HOUR EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your "24-HOUR EXPEDITE" request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is \$25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

Time Constraints: Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in acceptable fileable form.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgement (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.

West Virginia Secretary of State

Business & Licensing Division Tel: (304)558-8000 Fax: (304)558-8381

Website: www.wvsos.gov

Rev. 11/2017

USE BLACK INK ONLY - DO NOT HIGHLIGHT e-Payment Authorization This document contains confidential financial information and will be properly shredded after payment has been processed by this office. Electronic storage of payment information is only permitted by signed authorization below which may be retracted at any time by written request by the authorized party. **Service Type:** Fax E-mail Mail Payment by Card (card holder name and billing address required below) Card Type: Mastercard Discover Visa American Express Credit Card Number: V Code* * 3-digit number on back of VISA, MasterCard and Discover cards. 4-digit number on front right side of American Express card. NOTICE: For security and verification purposes, all credit card payments must include the 3- or 4-digit CVV2 code (V Code) number located on the credit card. Failure to include this code will result in the rejection of your filing or service request. Credit Card Expiration Date: Month: **Amount to Charge Card: USD \$ Order Information** (required) **Entity Name: Card Holder Information:** Name as it appears on the account Billing Address Zip Code City State Telephone Ext. **Payment Information Storage Authorization** (optional) I authorize the Secretary of State to store this payment information for future payment transactions processed by Secretary of State: Date **Authorized Signature Payment Authorization** (required) I authorize the Secretary of State to bill an amount not to exceed the following to be charged to the above listed account(s): Date

Not to Exceed Amount: USD \$

Authorized Signature