CERTIFICATE OF WEST VIRGINIA LIMITED PARTNERSHIP
Form LP-1
Rev. 6/5/2019

West Virginia Secretary of State
Business & Licensing Division
Tel: (304)558-8000
Fax: (304)558-8381
Website: www.wvsos.gov

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

FILING FEE: $100
*** Fee Waived for Veteran-owned organization**

Control # _____

***** We, the undersigned, hereby form a Limited Partnership according to the provisions of West Virginia Code §47-9. *****

1. The **name** of the **limited partnership** shall be (See **Section 1** of instructions for name requirements.): _____

2. The **address** of the **principal office** is:
   Street: _____
   City: _____ State: _____ Zip Code: _____
   Located in the **County** of (required): 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 correspondence may be received: _____

7. **Website address** of the business, if any (*ex: yourdomainname.com*): _____

8. Do you **own or operate more than one business in West Virginia**? ☐ **Yes** * *Answer **a. and b.** below.* ☐ **No** ☐ **Decline to answer**

   If "**Yes**"... a. How many businesses? _____ b. Located in how many West Virginia counties? _____

9. a. The **business purpose** (activity) in which the partnership engages is [In the space below, describe the type of business activity which will be conducted in West Virginia.]: *NOTE - **"Professional" business organizations** must attach to this application the **Verification of Eligibility** (Form **VOE**) authorized by your professional state licensing board (*see attached instructions and* **CHECK BOX** *below)*.

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

b. Will the above purpose include any business activity conducted as a **consumer litigation financier** pursuant to WV Code §46A-6N?

☐ **Yes** [By checking "Yes," the applicant affirms the above **purpose includes the required statement that the organization shall be designated as a litigation financier** pursuant to WV Code §46A-6N**.** You are also affirming that you have included with this application an original completed copy of the **required** Application for Registration as a Litigation Financier (Form LF-1) with the associated requisite filing fee.]

☐ **No** [Proceed to Section 10.]

10. The **name(s) and business address(es) of** each **general partner** is (information is required for each general partner; attach additional pages if necessary - DO NOT list "limited partners.") :

	Name	Mailing Address	City	State	Zip Code
a)					
b)					
c)					

11. Any other matters the partners determine to include in the certificate are (add additional pages if necessary):

_____

12. Is the organization a "**veteran-owned**" organization?

Effective **JULY 1, 2015**, to meet the requirements for a "**veteran-owned**" organization, the entity filing the registration must meet the following criteria per West Virginia Code §59-1-2a:

1. A "**veteran**" must be honorably discharged or under honorable conditions, and
2. A "**veteran-owned business**" means a business that meets one of the following criteria:
   - Is at least fifty-one percent (51%) unconditionally owned by one or more veterans; or
   - In the case of a publicly owned business, at least fifty-one percent (51%) of the stock is unconditionally owned by one or more veterans.

☐ **Yes** (If "**Yes,**" attach **Form DD214**) ➡ ☐ **CHECK BOX** indicating you have attached **Veteran Affairs Form DD214**

☐ **No**

You may obtain a copy of your Veterans Affairs Form DD214 by contacting:

National Personnel Records Center
Military Personnel Records
1 Archives Drive
St. Louis, MO 63138
Toll free: 1-86-NARA-NARA or 1-866-272-6272
Phone: 314-801-0800
www.archives.gov/veterans/military-service-records

Per WV Code 59-1-2(j) effective July 1, 2015, the **registration fee is waived** for entities that meet the requirements as a "**veteran-owned**" organization. See attached instructions to determine if the organization qualifies for this waiver. In addition, a "**veteran-owned**" entity will have **four (4) consecutive years of Annual Report fees waived** AFTER the organization's initial formation [see WV Code 59-1-2a(m)].

13. **Contact and Signature Information*** (Must be signed by every general partner per West Virginia Code §47-9-11):

a. Contact person to reach in case there is a problem with filing: _____ Phone: _____

We, the undersigned general partners, do hereby affirm under penalty of perjury that the partnership has determined to form a limited partnership under the provisions of West Virginia Code §**47-9**, and that the facts Stated herein are true to the best of our knowledge.

Name of Partner (Type or Print)	Signature*	Date

Important Legal Notice Regarding Signature:* Per **West Virginia Code §31D-1-129**. Penalty for signing false document.** Any person who signs a 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.

Reset Form Print Form

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 not** 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 brief description of the business activity in which the partnership engages. 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	[Article 12]	Engineers	[Article 13]
Land Surveyors	[Article 13a]	Osteopathic Physicians & Surgeons	[Article 14]
Chiropractors	[Article 16]	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 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**.]

Expedite Fee is additional if requesting expedite service. See **Customer Order Request** form for more information.

Registration fee* _____

$15 per certified copy: +_____

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.

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Rev. 9/2018

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 CUSTOMER ORDER REQUEST 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.gov
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.gov**
- **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 e-Payment Authorization 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 Office
One-Stop Business Center
1615 Washington Street East
Charleston, WV 25311
Phone: (304) 558-8000
Fax: (304) 558-8381
Hours: Mon. - Fri. 8:30a - 5:00p EST

Clarksburg Office
North Central WV Business Center
200 West Main Street
Clarksburg, WV 26301
Phone: (304) 367-2775
Fax: (304) 627-2243
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

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Website: www.wvsos.gov

Rev. 9/2018

Customer Order Request

SUBMIT THIS COMPLETED FORM WITH YOUR FILING.

STOP

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**
(Avg. processing turnaround **5-10 business days**)

Email to: CorpFilings@wvsos.gov

☐ **24-HOUR** Expedite***
(additional **$25.00** fee included)

☐ **2-HOUR** Expedite
(additional **$250.00** fee included)

☐ **1-HOUR** Expedite
(additional **$500.00** fee included)

Email to: eFilings@wvsos.gov

*"Processing" indicates the filing will be completed and registered in the Secretary of State registration database.
****Standard Processing** applications received by **E-MAIL** or **FAX must include the e-Payment Authorization form with credit card information.**
***NOTE: Orders filed in person through any Secretary of State office location requesting the filing be processed will be assessed a 24-HOUR Expedite fee of $25.00 per order.**

Name of Entity: _____

Return filing to:
(Return Address) _____

Contact Name: _____ Phone: _____

Return Delivery Options: Email or Fax options do not receive a copy via mail; must be ordered separately.

☐ Email to: _____ ☐ Fax to: _____

☐ Hold for Pick Up ☐ Mail to 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.**

Total Amount:

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.

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e-Payment Authorization

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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: ☐ Visa ☐ Mastercard ☐ Discover ☐ 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: Year:

Amount to Charge Card: USD $

Order Information *(required)*

Entity Name:

Card Holder Information:

Name as it appears on the account

Billing Address

City State Zip Code

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:

X 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):

X Date

Authorized Signature

Reset Form

Not to Exceed Amount: USD $