

**MICHIGAN DEPARTMENT OF LABOR & ECONOMIC GROWTH  
BUREAU OF COMMERCIAL SERVICES**

Date Received

(FOR BUREAU USE ONLY)

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**APPLICATION FOR REGISTRATION TO TRANSACT BUSINESS IN MICHIGAN**

**For use by Foreign Limited Partnerships**

(Please read information and instructions on the last page)

**L**

*Pursuant to the provisions of Act 213, Public Acts of 1982, the undersigned general partner executes the following Certificate:*

1. a. The name of the limited partnership is:
- b. The name under which the limited partnership proposes to register and transact business in Michigan, if different from that in 1(a), is:

2. a. The limited partnership was formed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ under the laws of the State of \_\_\_\_\_.
- b. The names and addresses of the governmental agencies with which the Certificate of Limited Partnership is on file are:

3. The general character of the business the limited partnership proposes to transact in Michigan is:

4. a. The name of the agent for service of process is:
- b. The address of the agent for service of process is:

5. The limited partnership hereby appoints the Bureau of Commercial Services, Michigan Department of Labor & Economic Growth, as agent for receipt of service of process in the event an agent has not been appointed in Item 4(a), or if appointed, in the event that agent has resigned, the agent's authority has been revoked, or the agent cannot be found or served with the exercise of reasonable diligence. The name and business or residence address of a general partner to whom the Bureau of Commercial Services is to send copies of any process served on the Bureau is **(Must be different than agent shown in Item 4(a))**:

6. The address of the limited partnership office is:

7. Check all appropriate boxes

- Names and addresses of general partners are in the Certificate of Limited Partnership on file in the state of organization.
- Names and addresses of limited partners are in the Certificate of Limited Partnership on file in the state of organization.
- The Certificate of Limited Partnership filed in the state of organization is not required to include the name and address of partners. Attached are \_\_\_\_\_ page(s) containing the name and address of the partners not required to be included in the Certificate of Limited Partnership.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_

By \_\_\_\_\_  
(Signature of General Partner)

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Name of General Partner if a corporation or other entity)

State of \_\_\_\_\_ }  
County of \_\_\_\_\_ } SS.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ , \_\_\_\_\_

by \_\_\_\_\_

\_\_\_\_\_  
(Signature of Notary)

\_\_\_\_\_  
(Type or Print Name of Notary)

Notary Public for \_\_\_\_\_ County,

State of \_\_\_\_\_

(Notary Seal)

My commission expires \_\_\_\_\_

Preparer's name \_\_\_\_\_

Business telephone number ( ) \_\_\_\_\_

### INFORMATION AND INSTRUCTIONS

1. The Application for Registration to Transact Business cannot be filed until this form is submitted.
2. Submit one original of this document. Upon filing, the document will be added to the records of the Bureau of Commercial Services. The original will be returned to your registered office address, unless you enter a different address in the box on the front of this Application.

Since this document will be maintained on electronic format, it is important that the filing be legible. Documents with poor black and white contrast, or otherwise illegible, will be rejected.

3. This Application is to be used by foreign limited partnerships for the purpose of registering in Michigan pursuant to section 902 of Act 213, P.A. of 1982.
4. Item 1 - The name under which the limited partnership registers in Michigan must contain, without abbreviation, the words "limited partnership". The name may not contain the name of a limited partner (unless the name is also the name of a general partner or the business of the limited partnership had been carried on under that name before the admission of that limited partner). The name may not contain any word or phrase indicating or implying that it is organized other than for a purpose described in Item 3 of this Application. The name in 1(a) is the name under which it is registered in its state of organization. If a name is specified in Item 1(b), all other documents filed with the Bureau must be filed under that name.
5. Item 2(b) - Enter the names and addresses of all governmental departments, agencies, or authorities where the Certificate of Limited Partnership is currently on file (and from which copies may be obtained) in the state in which the limited partnership was formed.
6. Item 4 - The agent must be an individual resident of Michigan, a domestic corporation, or a foreign corporation having a place of business in Michigan and authorized to do business in Michigan. The address of the agent must be a location; P.O. box addresses are not acceptable.

Leave this item blank if the Bureau is to be appointed as the agent of the limited partnership for service of process.

7. Item 6 - Enter the address of the office required to be maintained in the state where the limited partnership was organized by the laws of that state or, if not required, the principal office of the limited partnership.
8. If the Certificate of Limited Partnership filed in the foreign limited partnership's state of organization is not required to include the name, business or residence address of the partners, a list of the names and addresses must be attached.
9. This Application must be signed in ink and sworn to by a general partner.
10. **NONREFUNDABLE FEE:** Make remittance payable to the State of Michigan. Include limited partnership name and identification number on check or money order ..... **\$10.00**

To submit by mail:  
 Michigan Department of Labor & Economic Growth  
 Bureau of Commercial Services  
 Corporation Division  
 7150 Harris Drive  
 P.O. Box 30054  
 Lansing, MI 48909

To submit in person:  
 2501 Woodlake Circle  
 Okemos, MI  
 Telephone: (517) 241-6470

Fees may be paid by VISA or Mastercard when delivered in person to our office.

MICH-ELF (Michigan Electronic Filing System):

First Time Users: Call (517) 241-6420, or visit our website at <http://www.michigan.gov/corporations>  
 Customer with MICH-ELF Filer Account: Send document to (517) 241-9845