

1. FILING FEES

A. For new certificate for first two partners \$25.00 For each additional partner (not to exceed \$250)

B. For fictitious name used by a 3.00

limited partnership or limited liability partnership 25.00

FOR OFFICE USE ONLY ID Number: WO Number: Filed: Ву: Expiration Date:

New registration with a five year duration.
Amended registration with a continuing duration

2. This certificate is a(n):

C. For amended certificate 25.0	0	Amended	registration with a conti	nuing duration.		
SEE REVERSE SIDE FOR FEES, FILING AND I	MAILING INST	TRUCTIONS				
TYPE OR PRINT LEGIBLY			For reference	e, see North Dakota C	entury Code, Chapter 45-11.	
3. Fictitious name:				4. Fictitious name is General Partn		
If a fictitious name is used by a limited partner limited partnership, the name of that partnersh	or a limited liablity	6. Federal ID #:				
7. Address of principal place of business: (Street	/RR, and PO	Box if applicable, c	ity, state, zip+4)	•		
8. State of origin:	9. Telephone #:			10. Toll-free telephone #:		
The general partners, their Social Security/Fe number 5 indicates the fictitious name is u NAME	deral ID #, an	d the addresses of ited partnership, o SOCIAL SECURITY/ FEDERAL ID #	their principal places o or a limited liability lim Street/RR	f business (this section ited partnership.) COMPLETE ADDR PO Box	-	
12. A brief description of the nature of business to	o be transacte	ed in North Dakota:				
13. "I (we), an (the) above named partner(s) have	e read the fore	egoing certificate, k	know the contents, and	believe(s) the informat	ion provided is correct."	
Signature:	Date:		Signature:		Date:	
Signature:	Date:		Signature:		Date:	
Signature:	Date:		Signature:		Date:	
Signature:	Date:		Signature:			
14. Name of person to contact about this amend	nent:	E-Mail Address:		Da	aytime Telephone #:	
·						

INSTRUCTIONS FOR PARTNERSHIP FICTITIOUS NAME CERTIFICATE

Every partnership transacting business in North Dakota under a fictitious name, or a name not showing the names of all the partners, must file a Fictitious Name Certificate with the Secretary of State. Whenever there is a change in the general partners who are members of a partnership transacting business in North Dakota under a fictitious name, an amended certificate must be filed. When the fictitious name itself changes, the certificate on file must be canceled and a new Fictitious Name Certificate must be filed.

Every limited partnership, every limited liability partnership, and every limited liability limited partnership transacting business in North Dakota under a name other than the legal name as registered with the Secretary of State, must file a Fictitious Name Certificate with the Secretary of State.

The following numbers correspond to the numbered sections on the front of this form.

- (a) The fictitious name certificate filing fee is \$25 if there are two partners. If there are more than two partners, an additional fee of \$3 per additional partner must be paid. However, the fee shall not exceed a total fee of \$250. (Checks must be payable to "Secretary of State" and must be for U.S. negotiable funds. Payment may also be made by credit card using VISA, Master Card, or Discover.)
 - (b) The fictitious name certificate filing fee is \$25 when the fictitious name is used by a limited partnership, a limited liability partnership, or a limited liability limited partnership.
 - (c) The fee for an amended fictitious name certificate is \$25.
- Check whether this certificate is a new registration with the Secretary of State, or a certificate amending a previous registration.

A new registration has a duration of five years. The duration of an amended registration is five years from the date of the original registration.

- The fictitious name:
 - May not contain the word "corporation", "company", "incorporated", "limited liability company", or "limited", or an abbreviation of one of such words. This does not preclude the word "limited" from being used in conjunction with the word "partnership". (a)
 - (b)

 - "Limited partnership" or the abbreviation "L.P." or "LP" if fictitious name is filed to be used by a limited partnership;
 "Limited liability partnership" or either of the abbreviations "L.L.P." or "LLP" if fictitious name is used by a limited liability partnership; or
 "Limited liability limited partnership", or the abbreviation "L.L.L.P. or "LLLP' if fictitious name is used by a limited liability limited partnership.

 - A foreign professional limited liability partnership may use a name required or authorized in the state of origin.
 - May not be the same as, or deceptively similar to, any corporate name, limited liability company name, trade name, limited partnership name, limited liability partnership name, limited liability limited partnership name, or partnership fictitious name certificate, or a name in any other manner reserved with the secretary of state. (See North Dakota Century Code, Section 45-11-01)

If the fictitious name is the same as, or similar to a name registered, the partnership must obtain consent to use of name from the previously registered entity. An original consent to use of name signed by a principal of the previously registered name must be filed with the fictitious name certificate and the fee of \$10. A form for consent to use of name is not prescribed by the Secretary of State.

The name on an amended fictitious name certificate must be identical to that as originally filed. The name does not need to be researched for availability since the right to the name was secured with the original registration.

- Distinguish whether the partnership using the fictitious name is a general or limited partnership, a limited liability partnership, or a limited liability limited partnership.
- 5. If the fictitious name is being used by a limited partnership, a limited liability partnership, or a limited liability limited partnership, give the correct name as registered with the North Dakota Secretary of State.
- 6. To properly maintain partnership records, the partnership's Federal ID number is required.

Privacy: In accordance with N.D.C.C., Section 45-11-10, social security or Federal ID numbers are not disclosed to the public. They are used by the Secretary of State to maintain accurate fictitious name records. Therefore, while voluntary disclosure is requested, failure to do so will not result in rejection of the registration.

- 7. A complete address of the principal place of business is required. In this section, as well as all other sections requiring addresses on this certificate, an address must include a street or rural address, a postal box number if applicable, and the city, state, and zip code plus 4.
- 8. Provide the state of organization if fictitious name is used by a limited partnership, a limited liability partnership, or a limited liability limited partnership.
- The telephone number of the partnership's principal place of business is requested in order to provide better service to a filing partnership.
- Provide a toll-free telephone number if the partnership has one. A toll-free number will expedite services to the partnership for the duration of the filing.
- 11. Provide the full names of all the **current** general partners, their social security or Federal ID numbers, and complete mailing addresses of their principal places of business. (See definition of "complete address" in number 7.) If adequate space is not provided to list all general partners, attach an additional schedule listing all other general partners.

If a general partner is either a corporation, a limited liability company, a limited partnership, a limited liability partnership, a limited liability partnership, or another general partnership using a fictitious name, the general partner must be registered separately with the Secretary of State before this fictitious name certificate will be effected.

The name and principal place of business of a general partner on this fictitious name certificate must be **exactly** as separately registered with the Secretary of State. Any name change or change of principal address required for the separate registration of the general partner will require a simultaneous change to the fictitious name certificate.

Section 11 does not need to be completed if number 5 indicates that the fictitious name is used by a limited partnership, or a limited liability limited partnership.

- Provide a brief and specific description of the nature of the business to be transacted in North Dakota. "General business purposes" will not be accepted.
- The certificate must bear signatures of one or more of the general partners and the date on which each signed.
- 14. Provide the name, email address and daytime telephone number of the person to contact for any issues related to this application.

INSTRUCTIONS FOR PARTNERSHIP FICTITIOUS NAME CERTIFICATE (CONTINUED)

EXPEDITING PROCESS: Be sure to complete number 14. If the fictitious name certificate is being submitted by someone other than the partnership, provide a cover letter with the name and telephone number of the responsible individual so that any deficiencies on the form can be remedied by telephone.

FAX FILING: The document and Credit Card Payment Authorization may be faxed to 701-328-2992. A faxed filing does not expedite the process of the application in the office of the Secretary of State.

EMAIL: Email is not a secure utility for the transmission of private information or credit card authorizations. DO NOT EMAIL YOUR DOCUMENT TO THE SECRETARY OF STATE.

MAILING INSTRUCTIONS: Send certificate AND filing fees to:

Secretary of State State of North Dakota 600 E Boulevard Ave Dept 108 Bismarck ND 58505-0500

Telephone: 701-328-4284 Toll Free: 800-352-0867 (8-4284) Fax: 701-328-2992 Home Page: www.nd.gov/sos

RENEWALS: Every fictitious name certificate filed with the Secretary of State must be renewed every five years from the date of the initial filing. Forms for renewal are prescribed by the Secretary of State and are sent to the address of the principal place of business at least sixty days before the deadline for renewal. Therefore, it is imperative that the principal place of business address is always current with the Secretary of State.



(All items required to complete transaction)

(All items required to complete transaction)									
Name:									
Address:	City:	State: Zip Code:							
☐ VISA ☐ Master Card ☐ Discover	Signature: (Required by cr	redit card companies)							
Account Number:	Card Expires: Month Year								
	Date:								