This form must be type written or computer generated.

State of Utah
Department of Commerce
Division of Corporations & Commercial Code
Certificate of Limited Partnership

Print

Clear Form

Instructions

Important: Read instructions before completing form. **Non-Refundable Processing Fee: $70.00**

1. Name of Limited Partnership: (see instructions for name requirements)	
2. Principal office address:	Address City: State: Zip:

3. The name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent):

The address must be listed if you have a non-commercial registered agent. See instructions for further details.

Address of the Registered Agent: _____

Utah Street Address Required, PO Boxes can be listed after the Street Address

City: **State UT** **Zip:**

4a. General Partner Name & Address:	Name: _____ Street Address City State Zip
4b. General Partner Name & Address:	Name: _____ Street Address City State Zip

5. Under penalties of perjury, I declare that this Certificate of Limited Partnership has been examined by me and is, to the best of my knowledge and belief, true, correct and complete.

Signature: *Sign here after the form is printed* **Title:**

6. Purpose of the Limited Partnership:
(optional)

Under GRAMA {63-2-201}, all registration information maintained by the Division is classified as public record. For confidentiality purposes, you may use the business entity physical address rather than the residential or private address of any individual affiliated with the entity.

Optional Inclusion of Ownership Information: This information is not required.

Is this a female owned business? ◯ Yes ◯ No

Is this a minority owned business? ◯ Yes ◯ No If yes, please specify: Select/Type the race of the owner here

Mailing/Faxing Information: www.corporations.utah.gov/contactus.html Division's Website: www.corporations.utah.gov