

**NOTICE OF REGISTRATION OF FOREIGN LIMITED LIABILITY PARTNERSHIP (SS-4486)**



Business Services Division  
**Tre Hargett, Secretary of State**  
**State of Tennessee**  
312 Rosa L. Parks AVE, 6th FL.  
Nashville, TN 37243-1102  
(615) 741-2286

*For Office Use Only*

Filing Fee: \$50.00 per member (minimum \$250, maximum of \$2,500)

Pursuant to the provisions of the Tennessee Revised Uniform Partnership Act, Section 61-1-1004(d), the undersigned foreign limited liability partnership submits the following notice of registration:

1. The name of the limited liability partnership is:

(Note: Pursuant to Section 61-1-1003(a), each limited liability partnership name must contain the words "Registered Limited Liability Partnership" or the abbreviation "LLP" or "L.L.P.")

2. The name under which the foreign registered limited liability partnership proposes to register and transact business in the State of Tennessee, if different than listed in No. 1, is:

(Note: Registration of a name different than listed in #1 requires the simultaneous filing of form SS-4493, application for registration of assumed LLP name.)

3. This limited liability partnership was formed under the laws of the State/Country of:

4. The name of the registered agent and complete registered office address in Tennessee is:

Agent's name: \_\_\_\_\_

Registered Office Street Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip \_\_\_\_\_ County: \_\_\_\_\_

5a. The complete address of the principal office is:

Physical Street Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip \_\_\_\_\_ County: \_\_\_\_\_

5b. The mailing address (if different from the physical street address) is:

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip \_\_\_\_\_ County: \_\_\_\_\_

6. A brief statement of the business in which the partnership is engaged: \_\_\_\_\_

7. Other provisions: \_\_\_\_\_

8. The number of partners at the time of filing: \_\_\_\_\_

9. If applicable, this limited liability partnership has the additional designation of: \_\_\_\_\_

10. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date/time is: \_\_\_\_\_(date), \_\_\_\_\_(time).

(Note: A delayed effective date may not be later than the 90th day after the date this document is filed by the Secretary of State.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signer's Capacity