



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

Important: Read instructions before completing form.

Non-Refundable Processing Fee: \$70.00

1. Name of Limited Liability Limited Partnership: (see instructions for name requirements)	
2. Principal office address:	_____ Street Address City: _____ State: _____ Zip: _____
3. The name of the Registered Agent (Individual or Business Entity or Commercial Registered Agent): _____ <i>The address must be listed if you have a non-commercial registered agent. See instructions for further details.</i> Address of the Registered Agent: _____ City: _____ State UT Zip: _____ Utah Street Address Required, PO Boxes can be listed after the Street Address	
4a. General Partner Name & Address:	Name: _____ _____ Street Address _____ City _____ State _____ Zip _____ Signature: _____
4b. General Partner Name & Address:	Name: _____ _____ Street Address _____ City _____ State _____ Zip _____ Signature: _____
5. This Limited Partnership is a Limited Liability Limited Partnership.	
6. Under penalties of perjury, I declare that this Certificate of Limited Liability Limited Partnership has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Signature: _____ Name and Title: _____	
7. Purpose of the Limited Liability 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: _____	