

Instructions for Filing

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR A LIMITED LIABILITY COMPANY

(Form L-09)

- Item 1** Enter the complete name of the limited liability company (LLC) exactly as it appears in the records of the appropriate official in the state or country of formation. If the name cannot be used in North Carolina, enter the name (including an applicable limited liability company ending) that it wishes to use in North Carolina.
- Item 2** Enter the state or country of formation.
- Item 3** Select item “a” if the LLC has a principal office. Enter the complete street address of the principal office and the county in which it is located. If mail is not delivered to the street address of the principal office or if you prefer to receive mail at a P.O. Box or Drawer, enter the complete mailing address of the principal office.
Select item “b” if the LLC does not have a principal office.
- Item 4** Enter the name of the registered agent. The registered agent must be a North Carolina resident, an existing domestic business corporation, nonprofit corporation or limited liability company, or a foreign business corporation, nonprofit corporation or limited liability company authorized to transact business or conduct affairs in North Carolina.
- Item 5** Enter the complete street address of the LLC’s registered office and the county in which it is located. The registered office address must be located in North Carolina.
- Item 6** Enter the complete mailing address, in North Carolina, of the LLC’s registered agent, only if mail is not delivered to the street address above or if you prefer to receive mail at a P.O. Box or Drawer.
- Item 7** Enter the names, titles, and usual business address of the current principal company officials of the LLC.
- Item 8** Attach a current Certificate of Existence or document of similar import with filing.
- Item 9** If needed, a statement indicating a copy of the resolution of its managers adopting a fictitious name is attached.
- Item 10** The Department offers a free voluntary notification system for which you may choose to participate. If you would like to receive this free service, please provide a business e-mail address in the space provided. Your participation will not result in your e-mail address being viewable on our website. Participation will help us to prevent identity theft in the event an unauthorized person submits a fraudulent document for filing in the name of the business entity.
- Item 11** The document will be effective on the date and at the time of filing, unless a delayed date or an effective time (on the date of filing) is specified. If a delayed effective date is specified without a time, it will be effective at 11:59:59 p.m. A delayed effective date may be specified up to and including the 90th day after the day of filing.

Date and Execution

Enter the date the document was executed.

In the blanks provided enter:

- The name of the limited liability company as it appears in Item 1.
- The signature of the principal company official of the LLC executing the document.
- The name and title of the above-signed principal company official.

Attention: Foreign Limited Liability Companies wishing to render a professional service as defined in N.C.G.S. §55B-2(6) shall contact the appropriate North Carolina licensing board to determine whether compliance with additional licensing requirements may be mandated by law. Such limited liability companies should consult N.C.G.S. §57D-2-02 for further details.

State of North Carolina
Department of the Secretary of State

**APPLICATION FOR CERTIFICATE OF AUTHORITY
FOR LIMITED LIABILITY COMPANY**

Pursuant to §57D-7-03 of the General Statutes of North Carolina, the undersigned limited liability company hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1. The name of the limited liability company is _____;

and if the limited liability company name is unavailable for use in the State of North Carolina, the name the limited liability company wishes to use is _____.

2. The state or country under whose laws the limited liability company was formed is _____.

3. Principal office information: *(Select either a or b.)*

a. The limited liability company has a principal office.

The principal office telephone number: _____.

The street address and county of the principal office of the limited liability company is:

Number and Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

The mailing address, *if different from the street address*, of the principal office of the corporation is:

Number and Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

b. The limited liability company does not have a principal office.

4. The name of the registered agent in the State of North Carolina is: _____.

5. The street address and county of the registered agent's office in the State of North Carolina is:

Number and Street: _____

City: _____ State: NC Zip Code: _____ County: _____

6. The North Carolina mailing address, *if different from the street address*, of the registered agent's office in the State of North Carolina is:

Number and Street: _____

City: _____ State: NC Zip Code: _____ County: _____

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7. The names, titles, and usual business addresses of the current company officials of the limited liability company are:
(use attachment if necessary) (This document must be signed by a person listed in item 7.)

Name and Title

Business Address

Table with 2 columns: Name and Title, Business Address. Multiple rows for listing officials.

8. Attached is a certificate of existence (or document of similar import), duly authenticated by the secretary of state or other official having custody of limited liability company records in the state or country of formation. The Certificate of Existence must be less than six months old. A photocopy of the certification cannot be accepted.

9. If the limited liability company is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its managers adopting the fictitious name is attached.

10. (Optional): Please provide a business e-mail address: The Secretary of State's Office will e-mail the business automatically at the address provided above at no cost when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is offered, please see the instructions for this document.

11. This application will be effective upon filing, unless a delayed date and/or time is specified:

This the ___ day of ___, 20__

Name of Limited Liability Company

Signature of Company Official

Type or Print Name and Title

Notes:

1. Filing fee is \$250. This document must be filed with the Secretary of State.