



LP-6

State of California

Secretary of State

Foreign Limited Partnership Amendment to Application for Registration

A \$30.00 filing fee must accompany this form.

IMPORTANT – Read instructions before completing this form.

This Space For Filing Use Only

Entity Number

1. CA Secretary of State Entity Number

Entity Name (Enter the exact name of the limited partnership.)

2. Name Under Which the Foreign Limited Partnership Conducts Business in California

Items 3 through 13: (Complete ONLY the items to be amended or added by this filing. Attach additional pages, if necessary. Any other matters to be included may be made on an attachment to this document. Any attachments are incorporated herein by this reference and made part of this document.)

Entity Name as amended (Complete Item 3 if the actual name of the foreign limited partnership has changed in the foreign jurisdiction **AND** include a certificate from an authorized public official in the foreign jurisdiction, certifying that the limited partnership is in good standing and that the name was changed according to the laws of that jurisdiction. Complete Item 4 if amending or adding an alternate name in California. See instructions.)

3. Name of Foreign Limited Partnership As Amended in the Foreign Jurisdiction

4. Alternate Name (See instructions before completing Item 4.)

Entity Addresses

5a. Street Address of Principal Office City State Zip Code

5b. Mailing Address of Principal Office, if different from Item 5a City State Zip Code

6. Address of Office Required in the Jurisdiction of Formation, if any City State Zip Code

Agent for Service of Process (If the agent is an individual, complete both Items 7 and 8. If the agent is a corporation, complete Item 7 and leave Item 8 blank.)

7. Name of Agent for Service of Process

8. If an individual, Street Address of Agent for Service of Process in CA City State Zip Code
CA

General Partner Information (New Partner, Address Change, Name Change, and/or Withdrawn Partner(s))

9. New Partner Name Address City State Zip Code

10. Address Change Name Address City State Zip Code

11. Name Change From: To:

12. Withdrawn Partner(s) Name: Name:

Foreign Limited Liability Limited Partnership

13. ☐ Check this box if the foreign limited partnership is a foreign limited liability limited partnership.

Execution (This document must be signed by at least one general partner of the foreign limited partnership. If additional signature space is necessary, the signatures may be made on an attachment to this document.)

14. I declare I am the person who executed this instrument, which execution is my act and deed. By signing this document I affirm under penalty of perjury that the facts stated are true.

Signature of General Partner

Type or Print Name of General Partner