



STATEMENT OF FOREIGN QUALIFICATION

Limited Liability Partnership

Pursuant to the provisions of the Alaska Statutes, the undersigned limited liability partnership applies for a Certificate of Foreign Qualification and, for that purpose, submits the following statement:

1. The legal name of the limited liability partnership (The name of the foreign limited liability partnership that satisfies the requirements of the state or other jurisdiction under whose law it is formed must end with "Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP"):

--

The assumed name elected to use in Alaska if the legal name in not available:

--

2. State of domicile, date of formation, and the period of duration in the state or country of domicile: The period of duration is the length of time an entity expects to exist. It may be a specific number of years or "perpetual".

State of Domicile:	Date of Formation: (mm/dd/yyyy)	Duration:
--------------------	------------------------------------	-----------

3. The address of the partnership's chief executive office, and if different, the street address of an office in Alaska.

Name:			
Mailing Address:			
Physical Address if Mailing Address is a Post Office Box:			
	City:		ZIP Code:

If the chief executive office is not in Alaska, list address of the office in Alaska.

Name:			
Mailing Address:			
Physical Address if Mailing Address is a Post Office Box:			
	City:	AK	ZIP Code:

4. Registered Agent Name and Address.

Name:			
Mailing Address:			
Physical Address if Mailing Address is a Post Office Box:			
	City:	AK	ZIP Code:

5. The Department is appointed the agent of the partnership for service of process if the foreign limited partnership fails to appoint or maintain a registered agent.

A statement filed by a partnership must be executed by at least two partners or by a partner and another person authorized in the Statement of Partnership Authority. An individual who executes a statement as, or on behalf of, a partner or other person named as a partner in a statement shall personally declare under penalty of perjury that the contents of the statement are accurate.

A person who files a statement shall promptly send a copy of the statement to every nonfiling partner and to any other person named as a partner in the statement. Failure to send a copy of a statement to a partner or other person does not limit the effectiveness of the statement as to a person who is not a partner.

Signature of Partner or Authorized Person	Printed Name	Title	Date

If you have specific legal questions or concerns about this filing, you are strongly advised to consult an attorney or other professional to assist you. Mail the completed Statement of Foreign Qualification and the **\$350.00** filing fee (in U.S. dollars) to:

State of Alaska
Corporations Section
PO Box 110806
Juneau, AK 99811-0806

For additional information or forms please visit our web site at: www.corporations.alaska.gov