

APPLICATION TO REGISTER FOREIGN CORPORATION NAME

Please read Instructions [C007i](#)

Check the box if you are **RENEWING** an existing name registration:

1. ENTITY TYPE – check one box to indicate the type of entity registering the name:

- | | |
|---|--|
| <input type="checkbox"/> FOR-PROFIT CORPORATION | <input type="checkbox"/> INSURER |
| <input type="checkbox"/> NONPROFIT CORPORATION | <input type="checkbox"/> CREDIT UNION |
| <input type="checkbox"/> PROFESSIONAL CORPORATION | <input type="checkbox"/> COOPERATIVE MARKETING ASSOCIATION |
| <input type="checkbox"/> CLOSE CORPORATION | <input type="checkbox"/> CORPORATE SOLE |
| <input type="checkbox"/> BUSINESS TRUST | |

2. NAME OF CORPORATION IN THE STATE OR COUNTRY OF INCORPORATION – (FOREIGN NAME) – give the exact, true name of the foreign corporation:

3. NAME TO BE REGISTERED – (ENTITY NAME) – give the name to be registered *AND* check one box to identify the name being registered (only one box should be checked):

- | | |
|---|---|
| <input type="checkbox"/> Name of corporation in its state or country of incorporation (foreign name), with no additions or changes. | <input type="checkbox"/> Name of corporation in its state or country of incorporation with a corporate identifier added to it. |
|---|---|

4. STATE OR COUNTRY OF INCORPORATION: _____

5. DATE OF INCORPORATION IN STATE OR COUNTRY OF INCORPORATION:

6. NATURE OF ACTIVITIES – briefly describe the nature of the foreign corporation's activities:

7. By the signature appearing below, the foreign corporation certifies that attached hereto is a Certificate of Existence or Good Standing or equivalent document, dated within 60 days of delivery of this Application to the Commission, and certified by the Secretary of State or the official having custody of corporate records in the state or country of incorporation.
8. By the signature appearing below, the foreign corporation hereby applies for registration or renewal of registration of the corporation name listed in number 4 above from the date on which the Arizona Corporation Commission received this application for a period of **ONE YEAR**.
9. Give the name of the contact person for the foreign corporation that is registering the name:

Name of Foreign Corporation (see number 3 above)		
Name		
Address 1		
Apt./Suite No.		
City	State or Province	Zip
Country		

SIGNATURE: By typing or entering my name and checking the box marked "I accept" below, I acknowledge *under penalty of law* that this document is submitted in compliance with Arizona law.

I ACCEPT

Signature

Printed Name

Date

REQUIRED – check only one:

<input type="checkbox"/> I am the Chairman of the Board of Directors of the corporation filing this document.	<input type="checkbox"/> I am a duly-authorized Officer of the corporation filing this document.	<input type="checkbox"/> I am a duly authorized bankruptcy trustee, receiver, or other court-appointed fiduciary for the corporation filing this document.
--	---	--

Filing Fee: \$10.00 (regular processing)
 Expedited processing – add \$35.00 to filing fee.
 All fees are nonrefundable - see Instructions.

Mail: Arizona Corporation Commission
 Corporate Filings Section
 1300 W. Washington St., Phoenix, Arizona 85007
 Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.
 If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.