



Business Program
Colorado Secretary of State
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Certificate of Limited Partnership and Statement of Registration to Register as a Limited Liability Limited Partnership

Filed pursuant to § 7-62-201 and § 7-60-144 or § 7-64-1002 of the Colorado Revised Statutes (C.R.S.)

Section 1 – True name

The name that has been the true name of the domestic limited partnership is

(The name of a limited partnership must contain the term or abbreviation “limited partnership”, “limited”, “company”, “l.p.”, “lp”, “ltd.” or “co.”. See §7-90-601, C.R.S.)

Section 2 – Entity name

The domestic entity name of the limited liability limited partnership is

Section 3 – Principal office information

The principal office address of the limited liability limited partnership’s principal office is

Street Address

Street Address 1

Street Address 2

City

State

ZIP code

Province (if applicable)

Country

Mailing Address (leave blank if same as street address)

Mailing Address 1

Mailing Address 2

City

State

ZIP code

Province (if applicable)

Country

Section 4 – Registered agent information

The registered agent name and registered agent address of the limited liability limited partnership's registered agent are:

Name (if an individual)

Last name

First name

Middle

Suffix

Or

Entity

Caution: Do not provide both an individual and an entity name.

Street Address

Street Address 1

Street Address 2

City

State

ZIP code

Mailing Address (leave blank if same as street address)

Street Address 1

Street Address 2

City

State

ZIP code

The following statement is adopted by marking the box:

☐

The person appointed as registered agent has consented to being so appointed.

Section 5 – General partner information

The true name and mailing address of the general partner are:

Name (if an individual)

Last name

First name

Middle

Suffix

Or

Entity

Caution: Do not provide both an individual and an entity name.

Address

Address 1

Address 2

City

State

ZIP code

Province (if applicable)

Country

If the following statement applies, adopt the statement by marking the box and include an attachment.

- ☐ The limited partnership has one or more additional general partners and the name and mailing address of each additional general partner are stated in an attachment.

Section 6 – Limited partners

The following statement is adopted by marking the box:

- ☐ There are at least two partners in the partnership, at least one of whom is a limited partner.

Section 7 – Attachments (if applicable)

If applicable, adopt the following statement by marking the box and include an attachment:

- ☐ This document contains additional information as provided by law.

Section 8 – Delayed effective date (if applicable)

The delayed effective date and/or time (mm/dd/yyyy hour:minute am/pm) of this document is (if applicable):

Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. If you don't enter a specific time, the filing will take effect at 11:59 PM. Times are MST/MDT.

Section 9 – Notice of perjury

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

Section 10 – Filer's information

The true name and mailing address of the individual causing the document to be delivered for filing are:

Last name	First name	Middle	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address 1

Address 2

City	State	ZIP code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Province (if applicable)	Country
<input type="text"/>	<input type="text"/>

If the following statement applies, adopt the statement by marking the box and include an attachment:

☐ This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Section 11 – Disclaimer

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet.

Questions should be addressed to the user's legal, business or tax advisor(s).