

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

**APPLICATION TO RESERVE A NAME
LIMITED PARTNERSHIP – DOMESTIC AND FOREIGN**

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

FILING FEE \$10.00

1. Pursuant to the 1976 S.C. Code of Laws, as amended, Section 33-42-40, the undersigned applies to the Secretary of State to reserve the following limited partnership name for a period of one hundred twenty days from the date of filing this application:

2. Name, address and signature of applicant:

(Name)

(Street Address)

(City, State, Zip Code)

Date: _____

Name Reserved:

Signature

Type or Print Name

