

DSCB: 15-1954/5954



**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$152 plus \$100 additional for each new corporation/limited partnership/limited liability company in excess of one resulting from the division, made payable to the Department of State.
- B. Under 15 Pa.C.S. • 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) Two copies of a completed form DSCB:15-134B (Docketing Statement-Changes).
  - (2) *Business/Nonprofit Corporation Only:* One copy of a separate completed form DSCB:15-134A (Docketing Statement), with respect to each new corporation resulting from the division, unless the new corporation is a nonqualified foreign corporation.
  - (3) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name). A change in name of a surviving corporation/limited partnership/limited liability company shall contain a statement of the complete new name.
  - (4) Any necessary governmental approvals.
  - (5) Tax clearance certificates are required from the Department of Revenue and the Bureau of Employment security of the Department of Labor and Industry as described in Instruction G.
- D. The second alternate of Paragraph 5 is not applicable unless at least two new corporations/limited partnerships/limited liability companies result from the division.
- E. A completed form DSCB:15-1306/2102/2303/2702/2903/3101/7102A (Articles of Incorporation-For Profit)/DSCB:15-5306 (Articles of Incorporation-Nonprofit)/DSCB:15-8511 (Certificate of Limited Partnership)/DSCB:15-8913 (Certificate of Organization) should be attached to the plan of division with respect to each new domestic business/nonprofit corporation/limited partnership/limited liability company resulting from the division. It is not necessary to execute such articles of Incorporation/Certificate of Limited Partnership/Certificate of Organization and an additional fee or fees relating the form should not be tendered.
- F. A foreign business/nonprofit corporation/limited partnership/limited liability company may effect a division resulting in one or more new domestic business/nonprofit corporations/limited partnerships/limited liability companies notwithstanding the fact that such foreign business/nonprofit corporation/limited partnership/limited liability company has not received a certificate of authority/application for registration to do business in Pennsylvania.
- G. If the dividing corporation/limited partnership/limited liability company will not survive the division and is a domestic business/nonprofit corporation/limited partnership/limited liability company or a qualified foreign business/nonprofit corporation/limited partnership/limited liability company and if none of the new corporations/limited partnerships/limited

liability companies resulting from the division will be either a domestic business/nonprofit corporation/limited partnership/limited liability company or a qualified foreign business/nonprofit corporation/limited partnership/limited liability company there must be submitted with this form tax clearance certificates from the Department of Revenue and the Bureau of Employment Security of the Department of Labor and Industry with respect to each domestic business/nonprofit corporation/limited partnership/limited liability company and qualified foreign business/nonprofit corporation/limited partnership/limited liability company evidencing payment of all taxes and charges payable to the Commonwealth.

DSCB:15-1954/5954

- partnership/limited liability company or a qualified foreign business/nonprofit corporation/limited partnership/limited liability company there must be submitted with this form tax clearance certificates from the Department of Revenue and the Bureau of Employment Security of the Department of Labor and Industry with respect to each domestic business/nonprofit corporation/limited partnership/limited liability company and qualified foreign business/nonprofit corporation/limited partnership/limited liability company evidencing payment of all taxes and charges payable to the Commonwealth.
- H. If the name of a commercial registered office provider is used in Paragraph 6 it must be preceded by a "c/o". See 15 Pa.C.S. § 109 (relating to name of commercial registered office provider in lieu of registered address).
- I. The effective date in Paragraph 7 may not be prior to the filing date, but the plan of division may state a prior effective date "for accounting purposes only."
- J. *Business Corporation Only*: If the dividing corporation is a foreign business corporation the following statement should be substituted in Paragraph 8: "The plan was authorized, adopted or approved, as the case may be, by the dividing foreign business corporation in accordance with the laws of the jurisdiction in which it is incorporated."
- K. *Business Corporation Only*: If the second option in Paragraph 9 is checked, the named resulting corporation is required by 15 Pa.C.S. • § 1901 (relating to omission of certain provisions from filed plans) to furnish a copy of the full text of the plan, on request and without cost, to any shareholder of any corporation that was a party to the plan and, unless all parties are closely-held corporations as defined in 15 Pa.C.S. • 1103 (relating to definitions), on request and at cost to any other person.
- L. *Nonprofit Corporation Only*: If the action was authorized by a body other than the board of directors or the members Paragraph 8 should be modified accordingly. If the dividing corporation is a foreign nonprofit corporation the following statement should be substituted in Paragraph 8: "The plan was authorized, adopted or approved, as the case may be, by the dividing foreign nonprofit corporation in accordance with the laws of the jurisdiction in which it is incorporated."
- M. *Nonprofit Corporation Only*: If the second option in Paragraph 9 is checked, the named resulting corporation is required by 15 Pa.C.S. § 5901 (relating to omission of certain provisions from filed plans) to furnish a copy of the full text of the plan, on request and without cost, to any person.
- N. *Limited Partnership/Limited Liability Company*: If the dividing limited partnership/limited liability company is a foreign limited partnership/limited liability company the following statement should be substituted in Paragraph 8: "The plan was authorized, adopted or approved, as the case may be, by the dividing foreign limited partnership/limited liability company in accordance with the laws of the jurisdiction in which it is organized."
- O. This form and all accompanying documents shall be mailed to the address stated above.
- P. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

<b>PENNSYLVANIA DEPARTMENT OF STATE CORPORATION BUREAU</b>	
<b>Articles of Conversion</b> (15 Pa.C.S.)	
Entity Number	<input type="checkbox"/> Domestic Business to Nonprofit (§ 1963) <input type="checkbox"/> Domestic Nonprofit to Business Corporation (§ 5963)
Name <hr/> Address <hr/> City                      State                      Zip Code <hr/>	<b>Document will be returned to the name and address you enter to the left.</b> ←

Fee: \$52

Filed in the Department of State on _____  <hr style="width: 80%; margin: 0 auto;"/> Secretary of the Commonwealth
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In compliance with the requirements of the applicable provisions (relating to articles of conversion), the undersigned, desiring to effect a conversion, hereby states that:

1. The name of the corporation is: <hr style="width: 90%; margin: 5px 0;"/>
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2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):					
<table style="width: 100%; border: none;"> <tr> <td style="width: 35%;">(a) Number and Street</td> <td style="width: 15%;">City</td> <td style="width: 15%;">State</td> <td style="width: 15%;">Zip</td> <td style="width: 20%;">County</td> </tr> </table> <hr style="width: 90%; margin: 5px 0;"/>	(a) Number and Street	City	State	Zip	County
(a) Number and Street	City	State	Zip	County	
<table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">(b) Name of Commercial Registered Office Provider</td> <td style="width: 30%;">County</td> </tr> </table> <hr style="width: 90%; margin: 5px 0;"/> c/o	(b) Name of Commercial Registered Office Provider	County			
(b) Name of Commercial Registered Office Provider	County				

3. The statute by or under which it was incorporated:
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4. The date of its incorporation:
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DSCB:15-1963/5963-2

5. Check, and if appropriate complete, one of the following:

The plan of conversion shall be effective upon filing these Articles of Conversion in the Department of State.

The plan of conversion shall be effective on: \_\_\_\_\_ at \_\_\_\_\_.  
Date Hour

6. Check one of the following:

The plan of conversion was adopted by the shareholders (or members) pursuant to 15 Pa.C.S. § 1905 or adopted by the members (or shareholders) pursuant to 15 Pa.C.S. § 5905.

The plan of conversion was adopted by the directors and shareholders (or members) pursuant to 15 Pa.C.S. §§ 1924(a) and 1962(b) or adopted by the directors and members (or shareholders) pursuant to 15 Pa.C.S. §§ 5924(a) and 5962(b).

*Option for Nonprofit to Business Only:* The plan of conversion was adopted by the board of directors pursuant to 15 Pa.C.S. §§ 5924(b) and 5962(b).

7. Check, and if appropriate complete, one of the following:

The plan of conversion is set forth in full in Exhibit A attached hereto and made a part hereof.

Pursuant to 15 Pa.C.S. § 1901/§ 5901 (relating to omission of certain provisions from filed plans) the provisions, if any, of the plan of conversion that amends or constitutes the operative provisions of the Articles of Incorporation of the converting corporation as in effect subsequent to the effective date of the plan is set forth in full in Exhibit A attached hereto and made a part hereof. The full text of the plan of conversion is on file at the principal place of business of the converting corporation, the address of which is:

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Number and streetCityStateZipCounty

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Conversion to be signed by a duly authorized officer thereof this

\_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_.

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Name of Corporation

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Signature

---

Title



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Corporation Bureau  
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  - (2) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name) shall accompany Articles of Conversion effecting a change of name and the change in name shall contain a statement of the complete new name.
  - (3) Any necessary governmental approvals.
- D. The effective date in Paragraph 5 may not be prior to the filing date, but the plan of conversion may state a prior effective date "for accounting purposes only."
- E. *For Nonprofit to Business Only:* If the action of a nonprofit corporation was authorized by a body other than the board of directors or members Paragraph 6 should be modified accordingly.
- F. *For Business to Nonprofit Only:* If the second option in Paragraph 7 is checked, the corporation is required by 15 Pa.C.S. § 1901 (relating to omission of certain provisions from filed plans) to furnish a copy of the full text of the plan, on request and without cost, to any shareholder and, unless the converting corporation is a closely-held corporation as defined in 15 Pa.C.S. § 1103 (relating to definitions), on request and at cost to any other person.
- G. *For Nonprofit to Business Only:* If the second option in Paragraph 7 is checked, the corporation is required by 15 Pa.C.S. § 5901 (relating to omission of certain provisions from filed plans) to furnish a copy of the full text of the plan, on request and without cost, to any person.
- H. This form and all accompanying documents shall be mailed to the address stated above.
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**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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**Articles of Dissolution  
Before Commencement of Business**  
(15 Pa.C.S.)

Entity Number

By Shareholders-Domestic Business Corporation (§ 1971)  
 By Members- Domestic Nonprofit Corporation (§ 5971)

Name <hr/> Address <hr/> City                      State                      Zip Code <hr/>	<b>Document will be returned to the name and address you enter to the left.</b> ←
---	--

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to voluntary dissolution by members or shareholders or incorporators), the undersigned, desiring that it should be dissolved, hereby states that:

1. The name of the corporation is:  
 \_\_\_\_\_

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
_____				_____

(b) Name of Commercial Registered Office Provider                      County  
 c/o \_\_\_\_\_

3. The statute by or under which it was incorporated:  
 \_\_\_\_\_

4. The date of its incorporation:  
 \_\_\_\_\_

5. Check one of the following:

*Business Corporation Only:* The corporation has not commenced business.

*Nonprofit Corporation Only:* The corporation has not received any property in trust or otherwise commenced business.

DSCB:15-1971/5971-2

6. The amount, if any, actually paid in on subscriptions for its shares or memberships, less any part thereof disbursed for necessary expenses, has been returned to those entitled thereto.

7. Check one of the following:  
\_\_\_ All liabilities of the corporation have been discharged.  
\_\_\_ Adequate provision has been made for the payment of the liabilities of the corporation.

8. Nonprofit Corporation Only:  
\_\_\_ A majority of the members (or shareholders) or incorporators elect that the corporation be dissolved.

9. Business Corporation Only: Check one of the following:  
\_\_\_ A majority of the incorporators elect that the corporation be dissolved.  
\_\_\_ A majority of the shareholders (or members) elect that the corporation be dissolved.

IN TESTIMONY WHEREOF, at least a majority of the members (or shareholders) or incorporators (nonprofit) or at least a majority of the incorporators or a majority in interest of the shareholders (or members) (business) of the above-named corporation has hereunto set their hands this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

DSCB:15-1971/5971



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**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form: two copies of a completed form DSCB:15-134B (Docketing Statement-Changes).
- D. When the corporation has more than three executing incorporators or shareholders, (business) or three executing incorporators or members (nonprofit), additional signature lines should be added as appropriate.
- E. This form and all accompanying documents shall be mailed to the address stated above.
- F. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.



**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

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Entity Number	<p><b>Articles of Dissolution-Domestic</b> (15 Pa.C.S.)</p> <p>___ Business Corporation (§ 1977) ___ Nonprofit Corporation (§ 5977)</p>
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<p>Name _____</p> <p>Address _____</p> <p>City _____ State _____ Zip Code _____</p>	<p>Document will be returned to the name and address you enter to the left.</p> <p>←</p>
---	--

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to articles of dissolution), the undersigned corporation, desiring to dissolve, hereby states that:

1. The name of the corporation is:

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2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
<hr style="width: 90%; margin-left: 20px;"/>				
(b) Name of Commercial Registered Office Provider				County
<hr style="width: 90%; margin-left: 20px;"/>				

3. The statute by or under which it was incorporated:

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4. The date of its incorporation:

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DSCB:15-1977/5977-2

5. The names and addresses, including number and street, of its directors are:

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6. The names and addresses, including number and street, and official titles of its officers are:

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7. Check one of the following:

- The proposal to dissolve voluntarily was adopted by the shareholders or members pursuant to 15 Pa.C.S. § 1905 or § 5905.
- The proposal to dissolve voluntarily was adopted by the directors and shareholders (or members) pursuant to 15 Pa.C.S. § 1974(a) or directors and member (or shareholders) pursuant to 15 Pa.C.S. § 5974(b).
- Option for Nonprofit Corporation Only:* The proposal to dissolve voluntarily was adopted by the board of directors pursuant to 15 Pa.C.S. § 5974(b).

8. Check one of the following:

- All liabilities of the corporation have been discharged.
- Adequate provision has been made for the discharge of the liabilities of the corporation.
- The assets of the corporation are not sufficient to satisfy and discharge its liabilities, and all the assets of the corporation have been fairly and equitably applied, as far as they will go, to the payment of such liabilities.

9. Check one of the following:

- All remaining assets of the corporation, if any, have been distributed as provided in the Business or Nonprofit Corporation Law of 1988.
- The corporation has elected to proceed under 15 Pa.C.S. Subch. 19H or 59H (relating to post dissolution claims) and any remaining assets of the corporation will be distributed as provided in that subchapter.

10. Check one of the following:

- There are no actions or proceedings pending against the corporation in any court.
- Adequate provision has been made for the satisfaction of any judgment or decree that may be obtained against the corporation in each action or proceeding pending against the corporation.

DSCB:15-1977/5977-3

11. Notice of the winding-up proceedings of the corporation was mailed by certified or registered mail to each known creditor and claimant of the corporation and to each municipal corporation in which the corporation's registered office or principal place of business in this Commonwealth is located.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Dissolution to be signed by a duly authorized officer thereof this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Corporation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title



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**Instructions for Completion of Form:**

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- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The second option in Paragraph 8 should be checked by a corporation that elects to proceed under 15 Pa.C.S. Subch. 19H or 59H (relating to post dissolution claims).
- D. The following, in addition to the filing fee, shall accompany this form:
  - (1) Tax clearance certificates from the Department of Revenue and from the Bureau of Employment Security of the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth.
  - (2) Any necessary governmental approvals.
- E. The corporation is required by 15 Pa.C.S. § 1975(b) or § 5975(b) (relating to notice to creditors and taxing authorities) to publish notice of the winding-up proceedings one time in the legal journal and newspaper of general circulation published in the county of its registered office, or in two newspapers of general circulation if no legal journal exists in such county, or in one newspaper of general circulation if that is the only one published in the county. Proofs of such publication should be kept with the corporate records of the corporation, and should not be submitted to, and will not be received by or filed in, the Department.
- F. This form and all accompanying documents shall be mailed to the above stated address.
- G. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

Entity Number

**Articles of Involuntary Dissolution-Domestic**  
(15 Pa.C.S.)

Business Corporation (§ 1989)

Nonprofit Corporation (§ 5989)

Name	<p><b>Document will be returned to the name and address you enter to the left.</b></p> <p>←</p>
Address	
City                      State                      Zip Code	

Fee: None

Filed in the Department of State on \_\_\_\_\_

  
  

\_\_\_\_\_

Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to articles of involuntary dissolution), the undersigned officer of the office of the clerk of the court of common pleas, desiring to evidence the dissolution of a corporation, hereby certifies that:

1. The name of the corporation is:

\_\_\_\_\_

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
_____				
(b) Name of Commercial Registered Office Provider				County
c/o: _____				

3. The court, term and number or other identification of the proceeding in which a decree dissolving the corporation was entered is:

\_\_\_\_\_

DSCB:15-1989/5989 – 2

4. Check one of the following:

\_\_\_ The costs and expenses of the foregoing proceeding and the liabilities of the corporation have been discharged and all the remaining assets of the corporation, if any, have been distributed as provided in 15 Pa.C.S. Subch. 19G or 59G (relating to involuntary liquidation and dissolution).

\_\_\_ The assets of the corporation are not sufficient to discharge such costs, expenses and liabilities, and all the assets of the corporation have been applied, as far as they will go, to the payment of such costs, expenses and liabilities.

5. A certified copy of the decree of dissolution is set forth in full in Exhibit A attached hereto and made a part hereof.

IN TESTIMONY WHEREOF, the undersigned officer of the office of the clerk of the court of common pleas has executed these Involuntary Articles of Dissolution this

\_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_.

\_\_\_\_\_  
Name of Court

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

DSCB:15-1989/5989



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- C. Any governmental approvals shall accompany this form.
- D. No tax clearance certificates from the Department of Revenue or from the Bureau of Employment Security of the Department of Labor and Industry evidencing payment of all taxes and charges payable to the Commonwealth are required to be submitted with this form.
- E. This form and all accompanying documents shall be mailed to the address stated above.
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<b>PENNSYLVANIA DEPARTMENT OF STATE CORPORATION BUREAU</b>	
<b>Articles of Amendment-Domestic Business Corporation Election of Non-stock Status/Statutory Close Status</b> (15 Pa.C.S.)	
Entity Number	<input type="checkbox"/> Election of Non-stock Status (§ 2104) <input type="checkbox"/> Election of Statutory Close Corporation Status (§ 2305)
Name <hr/> Address <hr/> City                      State                      Zip Code <hr/>	<b>Document will be returned to the name and address you enter to the left.</b> ←

Fee: \$52

Filed in the Department of State on _____  <hr style="width: 80%; margin: auto;"/> Secretary of the Commonwealth
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In compliance with the requirements of the applicable provisions (relating to election of an existing business corporation to become a non-stock corporation or a statutory close corporation), the undersigned business corporation, desiring to amend its Articles to reflect an election to become a non-stock business corporation or a statutory close corporation, hereby states that:

1. The name of the corporation is: <hr style="width: 90%; margin-top: 5px;"/>
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2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department): (a) Number and Street                      City                      State                      Zip                      County <hr style="width: 90%; margin-top: 5px;"/> (b) Name of Commercial Registered Office Provider                      County c/o: _____
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3. The statute by or under which it was incorporated:
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4. The date of its incorporation:
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5. Check, and if appropriate complete, one of the following: <input type="checkbox"/> The amendment shall be effective upon filing these Articles of Amendment in the Department of State. <input type="checkbox"/> The amendment shall be effective on: _____ at _____. <div style="text-align: center; margin-top: -10px;">                         Date                      Hour                     </div>
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DSCB:15-2104/2305 – 2

6. Check one of the following:

\_\_\_ The amendment was adopted by the shareholders or members pursuant to 15 Pa.C.S. §§ 1905 and 2104(b) or § 2305(b).

\_\_\_ *Option for Non-stock Corporation Only:* The amendment was adopted by the board of directors and shareholders (or members) pursuant to 15 Pa.C.S. §§ 1914(a) and (b) and 2104(b).

7. \_\_\_ The corporation elects to become a non-stock or statutory close corporation.

8. Check one of the following:

\_\_\_ *For Non-stock Corporation Status Only:* The corporation is organized on a non-stock basis.

\_\_\_ *For Statutory Close Corporation Status Only:* Neither the corporation nor any shareholder shall make an offering of any of its shares of any class that would constitute a "public offering" within the meaning of the Securities Act of 1933 (15 U.S.C. § 77a et seq.).

9. Check, and if appropriate, complete one of the following:

\_\_\_ The amendment adopted by the corporation, set forth in full, is as follows:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ The amendment adopted by the corporation is set forth in full in Exhibit A attached hereto and made a part hereof.

10. Check if the amendment restates the Articles:

\_\_\_ The restated Articles of Incorporation supersede the original Articles and all amendments thereto.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Amendment to be signed by a duly authorized officer thereof this

\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Corporation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title



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- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).
  - (2) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name) shall accompany Articles of Amendment effecting a change of names and the change in name shall contain a statement of the complete new name.
  - (3) Any necessary governmental approvals.
- D. *For Non-stock Corporation Status Only:* Under 15 Pa.C.S. § 2103 (relating to contents of articles and other documents of non-stock corporations) a non-stock corporation may, but need not, have a minimum guaranteed capital which shall be furnished by the subscribers thereto in such proportions as they may agree.
- E. *For Statutory Close Corporation Status Only:* Under 15 Pa.C.S. § 1103 (relating to definitions) a business corporation that has not more than 30 shareholders (counting shares that are held jointly or in common or in trust by two or more persons, as fiduciaries or otherwise, or that are held by spouses, as held by one shareholder) is a "closely-held corporation" but is not a "statutory close corporation" subject to 15 Pa.C.S. Ch. 23 (relating to statutory close corporations) unless an express election to be a statutory close corporation is set forth in its Articles. For general instructions relating to statutory close corporations see 19 Pa. Code Ch. 27 (relating to statutory close corporations). These instructions relate to such matters as applicability of statutory close corporation provisions, contents of articles, election of existing corporations to become close corporations, voluntary termination of close corporation status, filings with respect to breach and cure of qualifying conditions and preemptive rights, etc.
- F. This form and all accompanying documents shall be mailed to the above stated address.
- G. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

**Domestic Business Corporation  
Statutory Close Corporation**  
(15 Pa.C.S.)

Entity Number

Statement of Breach of Qualifying Condition (§ 2309A)  
 Statement of Cure of Breach of Qualifying Condition (§ 2309B)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Document will be returned to the name and address you enter to the left.**  
 ←

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to involuntary termination of statutory close corporation status; proceedings to prevent loss of status)/(relating to notice of cure of breach), the undersigned business corporation which is a statutory close corporation hereby states that:

1. The name of the corporation is: \_\_\_\_\_

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
_____				_____

(b) Name of Commercial Registered Office Provider \_\_\_\_\_ County \_\_\_\_\_

c/o: \_\_\_\_\_

3. Check box relating to applicable provision:

*Statement of Breach:* The provision included in its Articles pursuant to 15 Pa.C.S. § 2304(a) (relating to additional contents of articles of statutory close corporations) to qualify it as a statutory close corporation has been breached.

*Statement of Cure of Breach:* No breach of the provision included in its Articles pursuant to 15 Pa.C.S. § 2304(a) (relating to additional contents of articles of statutory close corporations) to qualify it as a statutory close corporation exists.

DSCB:15-2309A/2309B-2

IN TESTIMONY WHEREOF, the undersigned corporation has caused this Statement of Breach of Qualifying Condition/Statement of Cure of Breach of Qualifying Condition to be signed by a duly authorized officer thereof this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

---

Name of Corporation

---

Signature

---

Title



**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**General Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. This form and all accompanying documents shall be mailed to the address listed above.
- D. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

**Instruction for Statement of Breach of Qualifying Condition Only**

- E. Under 15 Pa.C.S. § 2309(a)(1) this form shall be filed within 30 days after the occurrence of the event amounting to a "public offering" of any of the shares of any class of the corporation within the meaning of the Securities Act of 1933 (15 U.S.C. § 77a et seq.), or within 30 days after the event has been discovered, whichever is later. The corporation shall within the same period furnish a copy of this form to each shareholder.
- F. Under 15 Pa.C.S. § 2309(a)(2) the corporation is required concurrently with filing of this form to take such steps as are necessary to correct the situation. When the situation has been remedied this form shall be filed under the direction of Statement of Cure of Breach of Qualifying Condition.

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

**Articles of Amendment-Domestic Business Corporation  
Election of Management/Professional Corporation Status**  
(15 Pa.C.S.)

Entity Number

Management Corporation (§ 2704)  
 Professional Corporation (§ 2904)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Document will be returned to the name and address you enter to the left.

←

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions (relating to election of an existing business corporation to become a management or professional corporation), the undersigned business corporation, desiring to amend its Articles to reflect an election to become a business corporation which is a management/professional corporation hereby states that:

1. The name of the corporation is:  
\_\_\_\_\_

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
_____				
(b) Name of Commercial Registered Office Provider				County
c/o: _____				

3. The statute by or under which it was incorporated:  
\_\_\_\_\_

4. The date of its incorporation:  
\_\_\_\_\_

5. Check, and if appropriate complete, one of the following:

The amendment shall be effective upon filing these Articles of Amendment in the Department of State.

The amendment shall be effective on: \_\_\_\_\_ at \_\_\_\_\_.

Date                      Hour

DSCB:15-2704/2904 - 2

**Election of Management Corporation, complete paragraphs 6 and 7**

6. *Check one of the following:*

The amendment was adopted by the shareholders or members pursuant to 15 Pa.C.S. §§ 1905 and 2704(b).

The amendment was adopted by the board of directors and shareholders (or members) pursuant to 15 Pa.C.S. §§ 1914(a) and (b) and 2704(b).

7.  The corporation elects to become a management corporation.

**Election of Professional Corporation, complete paragraphs 8 and 9**

8. *Check box*

The amendment was adopted by the unanimous consent of the shareholders (or members) pursuant to 15 Pa.C.S. §§ 1905 and 2904(b).

9.  The corporation elects to become a professional corporation.

10. *Check, and if appropriate, complete one of the following:*

The amendment adopted by the corporation, set forth in full, is as follows:

\_\_\_\_\_

\_\_\_\_\_

The amendment adopted by the corporation is set forth in full in Exhibit A attached hereto and made a part hereof.

11. *Check if the amendment restates the Articles:*

The restated Articles of Incorporation supersede the original Articles and all amendments thereto.

IN TESTIMONY WHEREOF, the undersigned corporation has caused these Articles of Amendment to be signed by a duly authorized officer thereof this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_

Name of Corporation

\_\_\_\_\_

Signature

\_\_\_\_\_

Title



**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) One copy of a completed form DSCB:15-134B (Docketing Statement-Changes).
  - (2) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name) shall accompany Articles of Amendment effecting a change of names and the change in name shall contain a statement of the complete new name.
  - (3) Any necessary governmental approvals.
- D. *For Management Corporation Only:* Paragraph 6 shall contain the text required by 15 Pa.C.S. § 2703 (relating to additional contents of articles of management corporations).
- E. *For Professional Corporation Only:* For general instructions relating to the incorporation of professional corporations see 19 Pa. Code Ch. 33 (relating to professional corporations). These instructions relate to incorporators, corporate name and stated purposes. For specific information relating to professional corporation names see 19 Pa. Code § 17.9 (relating to professional names).
- F. This form and all accompanying documents shall be mailed to the above stated address.
- G. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.



**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

Entity Number

**Statement of Election of  
Professional Corporation Status**  
(15 Pa.C.S. § 2905)

Name	<p><b>Document will be returned to the name and address you enter to the left.</b></p> <p>←</p>
Address	
City                      State                      Zip Code	

Fee: \$100

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of 15 Pa.C.S. § 2905 (relating to election of professional associations to become professional corporations), the undersigned, constituting all of the associates of a professional association, desiring to elect professional corporation status, hereby states that:

1. The name of the association is:

---

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

(a) Number and Street	City	State	Zip	County
<hr style="width: 90%; margin-top: 5px;"/>				
(b) Name of Commercial Registered Office Provider				County
c/o: <hr style="width: 90%; margin-top: 5px;"/>				

3. The initial Articles of Association of the association were filed in the Office of the Prothonotary of \_\_\_\_\_ County, Pennsylvania.

DSCB:15-2905-2

4. The associates of the professional association have elected to accept the provisions of 15 Pa.C.S. Ch. 29 (relating to professional corporations) for the government and regulation of the affairs of the association.

IN TESTIMONY WHEREOF, the undersigned constituting all of the associates of the professional association, have executed this Statement of Election of Professional Corporation Status this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

_____ (Seal)	_____ (Seal)
_____ (Seal)	_____ (Seal)
_____ (Seal)	_____ (Seal)
_____ (Seal)	_____ (Seal)
_____ (Seal)	_____ (Seal)
_____ (Seal)	_____ (Seal)



**Department of State  
Corporation Bureau  
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web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$100 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) One copy of a completed form DSCB:134A (Docketing Statement).
  - (2) One copy of a completed form DSCB:15-1311/5311/9305 (Statement of Summary of Record) and form DSCB:15-1915/5915 (Articles of Amendment-Domestic Corporation), restating the Articles to set forth all of the information required to be set forth in restated articles of a professional corporation. See 15 Pa.C.S. § 1311(a)(6).
- D. For general instructions relating to the incorporation of professional corporations see 19 Pa. Code Ch. 33 (relating to professional corporations). These instructions relate to incorporators, corporate name and stated purposes. For specific information relating to professional corporation names see 19 Pa. Code § 17.9 (relating to professional names). For general instructions relating to the incorporation of business corporations see 19 Pa. Code Ch. 23 (relating to business corporations generally). These instructions relate to such matters as corporate name, stated purposes, term of existence, nonstock status, authorized share structure and related authority of the board of directors, inclusion of names of first directors in the Articles of Incorporation, optional provisions on cumulative voting for election of directors, etc.
- E. This form and all accompanying documents shall be mailed to the address stated above.
- F. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

Entity Number

**Statement of Unpaid Fee**  
(54 Pa.C.S. § 3.104)

Name
Address
City <span style="margin-left: 100px;">State</span> <span style="margin-left: 100px;">Zip Code</span>

Document will be returned to the name and address you enter to the left.  
←

Fee: None

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of 54 Pa.C.S. § 154(a) (relating to enforcement and collection) and 19 Pa.Code § 3.104(d) (relating to returned checks; effect on filing), the Department of State hereby states that:

1. The name of the association or other entity to which this statement relates is:

---

2. The filing to which this statement relates was filed in the Department of State on \_\_\_\_\_ and  
Date  
recorded in the records of the Department at Roll \_\_\_\_\_, Film \_\_\_\_\_.

3. By reason of the failure of the Department to receive payment in full for the filing fee payable with respect to the filing to which this statement relates; and any related invoice fee, in the manner and within the time prescribed by 19 Pa. Code Ch. 3, the filing to which this statement relates has become void.

Department of State  
Corporation Bureau

---

Authorized Signature

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

Entity Number

**Application for Registration of Fictitious Name**  
54 Pa.C.S. § 311

Name	<p><b>Document will be returned to the name and address you enter to the left.</b></p> <p>←</p>
Address	
City                      State                      Zip Code	

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

  
  

\_\_\_\_\_  
Secretary of the Commonwealth

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

1. The fictitious name is:

\_\_\_\_\_

2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:

\_\_\_\_\_

3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is **not** acceptable):

Number and street	City	State	Zip	County
_____				

4. The name and address, including number and street, if any, of each individual interested in the business is:

Name	Number and Street	City	State
_____			
_____			
_____			
_____			

DSCB:54-311-2

5. Each entity, other than an individual, interested in such business is (are):

Name	Form of Organization	Organizing Jurisdiction
Principal Office Address		
PA Registered Office, if any		
Name	Form of Organization	Organizing Jurisdiction
Principal Office Address		
PA Registered Office, if any		

6. The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. Optional): The name(s) of the agent(s), if any, any one of whom is authorized to execute amendments to, withdrawals from or cancellation of this registration in behalf of all then existing parties to the registration, is (are):

---

IN TESTIMONY WHEREOF, the undersigned have caused this Application for Registration of Fictitious Name to be executed this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Individual Signature	Individual Signature
Individual Signature	Individual Signature
Entity Name	Entity Name
Signature	Signature
Title	Title



Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057

Web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name).
  - (2) An necessary governmental approvals.
- D. For general instructions relating to fictitious name registration see 19 Pa. Code Subch. 17C (relating to fictitious names). These instructions relate to such matters as voluntary and mandatory registration, general restrictions on name availability, use of corporate designators, agent for effecting amendments, etc., execution, official advertising when an individual is a party to the registration, and effect of registration and non-registration.
- E. The name of a commercial registered office provider may not be used in Paragraph 3 in lieu of an address.
- F. Insert in Paragraph 5 for each entity which is not an individual the following information: (i) the name of the entity and a statement of its form of organization, e.g., corporation, general partnership, limited partnership, business trust, (ii) the name of the jurisdiction under the laws of which it is organized, (iii) the address, including street and number, if any, of its principal office under the laws of its domiciliary jurisdiction and (iv) the address, including street and number, if any, of its registered office, if any, in this Commonwealth. If any of the entities has an association which has designated the name of a commercial registered office provider in lieu of a registered office address as permitted by 15 Pa.C.S. § 109, the name of the provider and the venue county should be inserted in the last column.
- G. Every individual whose name appears in Paragraph 4 of the form **must sign** the form exactly as the name is set forth in Paragraph 4. The name of every other entity listed in Paragraph 5 shall be signed on its behalf by an officer, trustee or other authorized person. See 19 Pa. Code § 13.8(b) (relating to execution), which permits execution pursuant to power of attorney. A copy of the underlying power of attorney or other authorization should not be submitted to, and will not be received by or filed in, the Department.
- H. If an individual is a party to the registration, the parties are required by 54 Pa.C.S. § 311(g) to advertise their intention to file or the filing of an application for registration of fictitious name. Proofs of publication of such advertising should not be submitted to the Department, and will not be received by or filed in the Department, but should be kept with the permanent records of the business.

DSCB: 54-311

- I. This form and all accompanying documents shall be mailed to the address stated above.
- J. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.



**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

**Fictitious Name  
Amendment, Withdrawal, Cancellation**  
(54 Pa.C.S.)  
 Amendment (§ 312)  
 Withdrawal (§ 313)  
 Cancellation (§ 313)

Entity Number

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Document will be returned to the name and address you enter to the left.**  
←

Fee: \$52

Filed in the Department of State on \_\_\_\_\_

---

Secretary of the Commonwealth

In compliance with the requirements of 54 Pa.C.S. Ch.3 (relating to fictitious names), the undersigned entity or entities, desiring to amend, withdraw or cancel from a fictitious name registration, hereby state(s) that:

1. The fictitious name is:

\_\_\_\_\_

2. The address of the principal place of business, including number and street, if any, is (the Department is authorized to conform to the records of the Department):

\_\_\_\_\_

Number and street                      City                      State                      Zip                      County

3. The last preceding filing with respect to this fictitious name was made in the Department on \_\_\_\_\_ (Date) at \_\_\_\_\_ (Roll and Film).

4. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DSCB:54-312/313-2

5. *Check one or more of the following, as appropriate:*

The fictitious name has been changed to:

---

The principal place of business set forth in paragraph 2 has been changed to (PO Box alone not acceptable):

Number and street	City	State	Zip	County
-------------------	------	-------	-----	--------

The following party(ies) has (have) been added to the registration and their signature(s) appear(s) at the end of this application.

Name	Number and street	City	State	Zip
------	-------------------	------	-------	-----

---



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The following party(ies) has (have) withdrawn from the business and their signature(s) appear(s) at the end of this application.

Name	Number and street	City	State	Zip
------	-------------------	------	-------	-----

---



---

The fictitious name registration is cancelled.

6. *Check boxes for Application for Amendment Only:*

This amendment, without reference to any other filing sets forth all information with respect to the fictitious name which would be required in an original filing under the Fictitious Names Act.

The applicant is familiar with the provisions of 54 Pa.C.S. § 332 (relating to effect of registration) and understands that filing under the Fictitious Names Act does not create any exclusive or other right in the fictitious name.

7. *Optional-See Instruction F:* This application has been executed by an agent heretofore designated for that purpose in a prior filing in this registration.





**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057  
web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$52 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
  - (1) If the amendment effects a change of name, any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name).
  - (2) Any necessary governmental approvals.
- D. For general instructions relating to fictitious name registration see 19 Pa. Code Subch. 17C (relating to Fictitious names). These instructions relate to such matters as voluntary and mandatory registration, general restrictions on name availability, use of corporate designators, agent for effecting amendments, etc., execution, official advertising when an individual is a party to the registration, and effect of registration and non-registration.
- E. The name of a commercial registered office provider may not be used in Paragraph 2 or 4B in lieu of an address.
- F. An amendment or cancellation shall be signed by all parties to the registration immediately preceding the filing unless an agent is authorized in the original registration and the agent signs the application. If the amendment adds a new party, the party added by the amendment must sign the form. In the case of withdrawal, the form need only be signed by the withdrawing party.
- G. If the filing involves a deceased party, the form should be signed by an executor or other fiduciary. It is not necessary to submit a short certificate showing appointment as fiduciary, etc. See 15 Pa.C.S. § 135(b).
- H. There is no requirement that the parties involved in an amended, canceled or withdrawal application advertise their intention to file or the filing of such application.
- I. No certificate will be issued by the Department in response to this filing.
- J. This form and all accompanying documents shall be mailed to the address stated above.
- K. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

**PENNSYLVANIA DEPARTMENT OF STATE  
CORPORATION BUREAU**

---

**Application for Certificate of Authority**  
(15 Pa.C.S.)

Entity Number

Foreign Business Corporation (§ 4124)  
 Foreign Nonprofit Corporation (§ 6124)

Name <hr/> Address <hr/> City                      State                      Zip Code <hr/>	<b>Document will be returned to the name and address you enter to the left.</b> ⇐
---	--

Fee: \$180

Filed in the Department of State on \_\_\_\_\_

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Secretary of the Commonwealth

In compliance with the requirements of the applicable provisions of 15 Pa.C.S. (relating to corporations and unincorporated associations), the undersigned, hereby states that:

1. The name of the corporation is:

---

2. *Complete only when the corporation must adopt a corporate designator for use in Pennsylvania.*  
The name which the corporation adopts for use in this Commonwealth is:

---

3. *If the name set forth in paragraph 1 or 2 is not available for use in this Commonwealth, complete the following:*  
The fictitious name which the corporation adopts for use in transacting business in this Commonwealth is:

---

The corporation shall do business in Pennsylvania only under such fictitious name pursuant to the attached resolution of the board of directors under the applicable provisions of 15 Pa.C.S. (relating to corporations and unincorporated associations) and the attached form DSCB:54-311 (Application for Registration of Fictitious Name).

4. The name of the jurisdiction under the laws of which the corporation is incorporated is:

---

5. The address of its principal office under the laws of the jurisdiction in which it is incorporated is:

---

Number and street                      City                      State                      Zip

DSCB:15-4124/6124-2

6. The (a) address of this corporation's proposed registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and street	City	State	Zip	County
(b) Name of Commercial Registered Office Provider				County
c/o:				

7. Check one of the following:

*Business Corporation:* The corporation is a corporation incorporated for a purpose or purposes involving pecuniary profit, incidental or otherwise.

*Nonprofit Corporation:* The corporation is a corporation incorporated for a purpose or purposes not involving pecuniary profit, incidental or otherwise.

IN TESTIMONY WHEREOF, the undersigned corporation has caused this Application for Certificate of Authority to be signed by a duly authorized officer thereof this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Name of Corporation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

DSCB: 15-4124/6124



**Department of State  
Corporation Bureau  
P.O. Box 8722  
Harrisburg, PA 17105-8722  
(717) 787-1057**

**Web site: [www.dos.state.pa.us/corp.htm](http://www.dos.state.pa.us/corp.htm)**

**Instructions for Completion of Form:**

- A. Typewritten is preferred. If not, the form shall be completed in black or blue-black ink in order to permit reproduction. The filing fee for this form is \$180 made payable to the Department of State.
- B. Under 15 Pa.C.S. § 135(c) (relating to addresses) an actual street or rural route box number must be used as an address, and the Department of State is required to refuse to receive or file any document that sets forth only a post office box address.
- C. The following, in addition to the filing fee, shall accompany this form:
- (1) One copy of a completed form DSCB:15-134A (Docketing Statement).
  - (2) Any necessary copies of form DSCB:17.2.3 (Consent to Appropriation or Use of Similar Name). If Letter of Consent cannot be obtained, the applicant may file in the Department a resolution of its board of directors adopting a fictitious name for use in transacting business in the Commonwealth of Pennsylvania which fictitious name is distinguishable upon the record to the name of any conflicting profit corporation or other association or confusingly similar to the name of any conflicting nonprofit corporation or other association and that is otherwise available for use by a domestic business or nonprofit corporation. See 15 Pa.C.S. §§ 4123(b)(1)(i) and 6123(b)(1)(i). An additional filing fee of \$52 shall accompany form DSCB:54-311 (Application for Registration of Fictitious Name).
  - (3) Any necessary governmental approvals. If required governmental approvals for the use of the name cannot be obtained, the applicant may file in the Department a resolution of its board of directors adopting a fictitious name that is otherwise available for use by a domestic business or nonprofit corporation. See 15 Pa.C.S. §§ 4123(b)(2) and 6123(b)(2).
- D. Where the name of the corporation does not comply with 19 Pa. Code § 23.3 (relating to business corporation names) or with 19 Pa. Code § 41.3 (relating to nonprofit corporation names) the corporation must adopt a corporate designator (corporation, incorporated, limited, etc. or abbreviation) for use in Pennsylvania and set forth the resulting name in Paragraph 2. Otherwise Paragraph 2 should remain blank. See also 19 Pa. Code § 17.41 (relating to foreign association names).
- E. The corporation is required by 15 Pa.C.S. § 4124(b) or by 15 Pa.C.S. § 6124(b) (relating to advertisement) to advertise its intention to apply or its application for a Certificate of Authority. Proofs of publication of such advertising should not be submitted to, and will not be received by or filed in, the Department, but should be filed with the minutes of the corporation.
- F. This form and all accompanying documents shall be mailed to the address stated above. Under 15 Pa.C.S. § 4125 or under 15 Pa.C.S. § 6125 upon the filing of this form the applicant corporation shall be deemed to hold a Certificate of Authority, and no actual certificate will be issued to the applicant by the Department.
- G. To receive confirmation of the file date prior to receiving the microfilmed original, send either a self-addressed, stamped postcard with the filing information noted or a self-addressed, stamped envelope with a copy of the filing document.

