

This Box For Office Use Only



STATE OF WASHINGTON
SECRETARY OF STATE

Name Reservation

See attached detailed instructions

- See Entity Type for Fees
- Expedited Service \$50.00

Expiration Date: _____

Registration Number: _____

NAME RESERVATION

Chapter 23B, 24.03, 25.10, 25.15, 25.05 RCW

SECTION 1

NAME OF ENTITY TO BE RESERVED: *(List alternates in order of preference)*

A. _____

B. _____

C. _____

SECTION 2

(Select the entity type that applies, see instructions for requirements)

- Limited Liability Company (LLC) \$30
- Profit Corporation \$30
- Non-profit Corporation \$20
- Limited Partnership (LP) \$30
- Limited Liability Partnership (LLP) \$30

SECTION 3

NAME, ADDRESS, AND SIGNATURE OF APPLICANT

Name: _____

Address: _____

City _____ State _____ Zip Code _____

NAME AND ADDRESS OF CLIENT *(if different from the applicant)*

Name: _____

Address: _____

City _____ State _____ Zip Code _____

This document is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.

X _____

APPLICANT SIGNATURE Title Date Phone Number

(Completed name reservations will be valid for 180 days from filing)

INSTRUCTIONS – NAME RESERVATION

Please complete all sections of the Name Reservation form. **USE DARK INK ONLY.** For an electronic, fillable version of this form, please visit our website at www.sos.wa.gov/corps

Expiration Date and Registration Number: If known, please provide the expiration date and/or registration number as recorded with the Office of the Secretary of State.

Section 1

Indicate the entity name to be reserved. List alternate choices in order of preference, the first name available will be the one reserved and will be indicated when filed.

Section 2

Indicate the entity type for the name reservation. Below are specific requirements by type:

- Limited Liability Company (LLC) – [RCW 25.15.015](#). Name must contain the words Limited Liability Company or LLC.
- Profit Corporation – [RCW 23B.04.020](#). Name must contain a corporate designation such as Corporation, Incorporated, Company, Limited or an abbreviation thereof.
- Nonprofit Corporation – [RCW 24.03.046](#). Name must not contain a corporate designation; however, designations such as association, group, club, etc. may be used.
- Limited Partnership – [RCW 25.10.061](#). Name must contain the words Limited Partnership or LP.
- Limited Liability Partnership – [RCW 25.05.505](#). Name must contain the words Limited Liability Partnership or LLP.

Section 3

Provide the name address and **signature of the applicant**. If the reservation is for someone other than the applicant, please provide the name and address of the client.

Additional Information:

FEES: The filing fee for standard service is \$30 for most entities, \$20 for Nonprofit. If expedited service is requested, include an additional \$50.00 and write “EXPEDITE” on the outside of the envelope. Make the checks or money orders payable to “Secretary of State”. ***(All filing fees are non-refundable)***

Mail completed forms and payment to:

Secretary of State
Corporation Division
801 Capitol Way S
PO Box 40234
Olympia WA 98504-0234

If you have questions, need assistance or would like to provide feedback please visit the Corporations Division website at www.sos.wa.gov/corps or call 360-725-0377.