



**Division of Corporations,
State Records and
Uniform Commercial Code**

New York State
Department of State
**DIVISION OF CORPORATIONS,
STATE RECORDS AND
UNIFORM COMMERCIAL CODE**
One Commerce Plaza
99 Washington Ave.
Albany, NY 12231-0001
www.dos.ny.gov

Request for Cancellation of Reservation of Name

PLEASE TYPE OR PRINT

Under §121-103 of the Revised Limited Partnership Act

APPLICANT'S NAME AND ADDRESS

NAME RESERVED

X _____

*Signature of applicant, applicant's attorney or agent
(If attorney or agent, so specify)*

Typed/printed name of signer

INSTRUCTIONS:

1. The applicant must be the same applicant as stated in the Application for Reservation of Name.
2. The name reserved must be stated exactly as in the original Application for Reservation of Name, including spacing and punctuation.
3. Attach the original Certificate of Reservation, or, if a Request for Extension of Reservation of Name was filed, the new Certificate of Reservation, to this Request for Cancellation of Reservation of Name.
4. This Request for Cancellation of Reservation of Name must be filed with the Department of State before the expiration of the current reservation.
5. A \$20 filing fee payable to the Department of State must accompany this request.