

Secretary of State Office  
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Pierre, SD 57501  
(605)773-4845  
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**APPLICATION FOR  
RESERVATION OF NAME  
LIMITED PARTNERSHIP**  
SDCL 48-7-103

**FILING FEE: \$25**

Make check payable to SECRETARY OF STATE

Pursuant to the provisions of the South Dakota Law, the undersigned hereby applies for reservation of the following name for a period of **one hundred twenty (120) days**. The same applicant may not again reserve the same name until more than sixty days after the expiration date.

1. Name of Applicant: \_\_\_\_\_

2. The address of the principal office:

\_\_\_\_\_  
Actual Street Address City State ZIP+4

\_\_\_\_\_  
Mailing Address in this State, if Different from Street Address City State ZIP+4

3. The name to be reserved is:

\_\_\_\_\_  
Note: The name shall reflect the requirements as set forth in SDCL 48-7-102.

4. Check one to indicate how the reserved name is to be used

Any person intending to organize a domestic limited partnership and adopt that name

Any domestic or foreign limited partnership registered in this state, which intends to adopt that name

Any foreign limited partnership intending to register in this state and adopt that name

Any person intending to organize a foreign limited partnership, intending to have it registered in this state, and adopt that name

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a criminal penalty (SDCL 22-39-36).

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature of an authorized person

Email \_\_\_\_\_  
(Optional)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

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