

Enter Filing Year

Secretary of State Office

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Pierre, SD 57501

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**ANNUAL REPORT**  
**FOREIGN LIMITED LIABILITY PARTNERSHIP**  
SDCL 48-7A-1003; 59-11-6; 59-11-24.1

**FILING FEE: \$65**

**Additional Fee for Delinquent Reports: \$50**

1. Business ID and Name:

Business ID

Business Name

2. The jurisdiction under whose law it is formed: \_\_\_\_\_

3. The address of the principal or chief executive office, wherever located.

Actual Street Address City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

Email Address (Optional)

4. The South Dakota Registered Agent's name

South Dakota law permits the registered agent **to be either: A)** a noncommercial registered agent (this may be an individual), **B)** a commercial registered agent, or **C)** an office holder. **Complete only one below, either (a) or (b) or (c).**

(a) The South Dakota Noncommercial Registered Agent's name: \_\_\_\_\_

Actual Street Address in this State City State ZIP+4

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

Email Address (Optional)

(b) When listing a Commercial Registered Agent, please state their CRA#. This number can be obtained from the Commercial Registered Agent.

Commercial Registered Agent Name CRA#

(c) Title of the office or other position with the business: \_\_\_\_\_

Business Office's Actual Street Address in this State City State ZIP+4

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

Email Address (Optional)

5. The names and business addresses of the partners.

Partner	Address	City	State	ZIP+4
Partner	Address	City	State	ZIP+4
Partner	Address	City	State	ZIP+4

6. Beneficial Interest (*optional*) - A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the Secretary of State's office is, by statute, not permitted, to provide legal advice.

Owner	Address	City	State	ZIP+4
Owner	Address	City	State	ZIP+4
Owner	Address	City	State	ZIP+4

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