

New Jersey Division of Revenue

Certificate of Amendment

Limited Liability Company

This form may be used to amend a Certificate of Formation of a Limited Liability Company on file with the Department of the Treasury. Applicants must insure strict compliance with NJSA 42, the New Jersey Limited Liability Act, and insure that all applicable filing requirements are met.

1. Name of Limited Liability Company:

2. Identification Number:

3. New LLC Name (if applicable):

4. Effective Date:

5. The Certificate of Formation is amended as follows (provide attachments if needed):

The undersigned represent(s) that this filing complies with State law as detailed in NJSA 42 and that they are authorized to sign this form behalf of the Limited Liability Company.

Signature:

Name:

Date:

Instructions for Form L-102

**CERTIFICATE OF AMENDMENT - LIMITED LIABILITY COMPANIES DOMESTIC
and FOREIGN
(Title 42:2B)**

STATUTORY FEE: **\$100**

The MANDATORY fields are:

Field # 1 -- Business Name

List the name as it appears on the records of the State Treasurer.

Field # 2 -- Number

List the ten-digit ID as it appears on the records of the State Treasurer.

Field # 3 -- Amendment

List the article from the original certificate that is being amended along with the text of the amendment, including a name change if applicable. If you are changing the name, then name availability provisions apply**:

**The name must be distinguishable from other names on the State's database. The Division of Revenue will check the proposed name for availability as part of the filing review process.

Field #4 -- Effective Date (as needed)

Specify the effective date if it is other than the filing date. The effective date cannot be before the filing date nor can it be more than 30 days after the filing date. The filing date is the date the document is received for processing.

ATTESTATIONS

Add a statement that indicates that the signers are authorized to sign on behalf of the LLC. Form L-102 provides the statement.

EXECUTION (DATE/SIGNATURE)

An authorized representative must sign. Also, list the date of execution (signature).

These documents should be filed in duplicate. Non-profits should file in triplicate.
Make checks payable to: TREASURER, STATE OF NEW JERSEY. (No cash, please)

Mail to: NJ Division of Revenue, PO Box 308, Trenton, NJ 08646