New Jersey Division of Revenue Application for Renewal of Name Reservation

| Pursuant to the laws of the State of New | Jersey, the | undersigned | l hereby | applies to | renew | the name |
|---|-------------|-------------|----------|------------|-------|----------|
| reservation for the following business na | me: | | | | | |

| C | |
|----------------------------|---|
| (Business Name With Design | nator, i.e. Corp., Inc., LLC, LP, etc.) |
| Applicant's Name (type): | |
| Applicant's Title: | |
| Applicant's Signature: | Date: |
| | days subsequent to acceptance and filing in the State insferred or canceled. The person signing this document |
| NJ Division of Revenue, | PO Box 308, Trenton, NJ 08646 |

Instructions for Form UNRR-3

APPLICATION FOR RENEWAL OF NAME RESERVATION

STATUTORY FEE: **\$50**The MANDATORY fields are:

Name

List the reserved name being renewed. Include the appropriate designator -- for example, LLC, INC., etc. (must be a current, filed/active, reserved name).

Applicant Name

List the name of the person for whom the business name is currently reserved. This must be the person listed as the applicant or transferee on the current, filed/active name reservation.

EXECUTION (Applicant's Signature/ Date)

The applicant must sign and date the application.

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 FAX File: 609.984.6851 (Fax Filing is an optional expedited service subject to processing fees that are in addition to those stated above. For FAX Filing information, visit http://www.state.nj.us/treasury/revenue/dcr/programs/ffs.html.)