

State Form 57412 (R5 / 8-24) Approved by State Board of Accounts, 2024

Diego Morales SECRETARY OF STATE BUSINESS SERVICES DIVISION

302 West Washington Street, Room E018 Indianapolis, IN 46204 Telephone: (317) 234- 9768 INBiz.in.gov

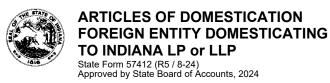
INSTRUCTIONS:

- Use 8½" x 11" white paper for attachments.
 Please <u>TYPE</u> or <u>PRINT LEGIBLY</u> in <u>INK</u>. Print all forms single sided.
- 3. For additional forms please visit in.gov/sos/business/division-forms
- 4. Make check or money order payable to the Secretary of State.
- 5. Submit original completed paperwork and payment to: 302 West Washington Street, Room E-018, Indianapolis, IN 46204.

INFORMATION CONTAINED ON THIS PAGE IS NOT PART OF THE PUBLIC RECORD.

Name of business		
E-mail address of business (SOS use only)		
RETURN DOCUMENTS TO:		
Name		
Street address, line 1		
Street address, line 2		
City	State	ZIP code
Telephone number	E-mail address (If different from above – SOS	S use only)





Indiana Code 23-0.5-9-51 23-0.6-5-5

FILING FEE: \$30.00

The undersigned, desiring to domesticate a foreign entity within the State of Indiana pursuant to the provisions of Indiana Code 23-0.6-5, executes the following Articles of Domestication.

	ARTICLE I – NAME AND J	LIRISDICTION OF E	NTITY				
SECTION 1: Name of the entity (The name must meet the requirements of Indiana Code 23-0.5-3-1.)							
a. The name of the entity immediately before filing these Articles of Domestication							
b. The new name of the entity if the entity name given above is unavailable in Indiana or if the entity wishes to change its name							
SECTION 2: Entity type (Example: corporation, limited liability company, etc.)							
The entity type of the domesticating entity							
SECTION 3: Jurisdiction							
The jurisdiction of formation of the entity immediately before filing these Articles of Domestication							
	ARTIOLE II. EE	FEOTIVE DATE					
Effective date of the Articles of Domestication	ARTICLE II – EF (month, day, year) (The effective date may n		(90) days after the date the Ar	ticles of Dome	stication were filed.)		
	ARTICLE III – REGISTERE	D AGENT INFORM	ATION				
To determine if your Registered Agent is a Commercial Registered Agent (CRA), go to INBIZ.in.gov.							
Provide either commercial registered ag			/.				
Commercial registered agent	Name of registered agent (Do not provide address.)						
OR							
Noncommercial registered agent	Name of registered agent						
Address (number and street) (A P.O. Box is not acceptable unless accompanied by a Rural Route number.) City State IN					ZIP code		
(OPTIONAL) E-mail address of the registered agent at which the registered agent will accept electronic service of process							
By checking the box, the Signator(s) represent(s) that the Registered Agent named in these Articles of Domestication has consented to the appointment of Registered Agent.							
ARTICLE IV – PUBLIC ORGANIC RECORD							
You must attach the entity's public organic record, and designate it as "Exhibit A." LP: Attach completed state form 51586.							
LLP: Attach completed state form 51572. Failure to attach a completed state form will result in REJECTION. You do NOT have to pay the filing fee on the attached form.							
	ARTICLE V -	APPROVAL					
This domestication was approved in accordance with the law of the entity's jurisdiction of formation.							
In Witness Whereof, the undersigned duly authorized representative of the entity executes these Articles of Domestication and verifies, subject to							
penalties of perjury, that the statements contained herein are true, this day of, 20 Signature							
Printed name		Title					