Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE 19901
Ph: 302-739-3073

Annual Report
for Limited Liability Partnership

Dear Sir or Madam:

Attached please find a form for an Annual Report of a Limited Liability Partnership to be filed in accordance with Section 15-1003 of the Revised Uniform Partnership Act of the State of Delaware. The fee to file the Certificate is $300.00 per partner. You will receive a stamped "Filed" copy of the submitted document. A certified copy may be requested for an additional $50. Expedited services are available. Please contact our office concerning these fees or you may consult our fee chart at corp.delaware.gov. Check should be made payable to "Delaware Secretary of State".

Please note the Annual Report is due in our office each year on or before June 1st.

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type the name of the person signing under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State
Division of Corporations

rev. 8/2026

Special Instructions – Annual Report of a Limited Liability Partnership

This form is to be used as a Template only. The following instructions will help you in correctly completing your Annual Report. The instructions are numbered to correspond with the article being referenced.

1. *The current name of the limited liability partnership exactly as it appears in our records. Please visit our website to verify the name.*

2. *List the current number of partners in the limited liability partnership.*

3. *Set forth the complete name and street address of the registered agent located in Delaware previously appointed to accept service of process for the limited liability partnership.*

Execution Block - *The document must be signed by a partner or authorized person of the limited liability partnership pursuant to Section 15-105 of Title 6, Chapter 15. The name of the person must be typed or written legibly underneath the signature.*

This form contains the basic information required by statute; if you need to add additional information permitted by statute you may draft a new document. Please feel free to call our office at 302-739-3073 for assistance in completing this form or you may visit our website at corp.delaware.gov.

Sincerely,

Delaware Division of Corporations

STATE OF DELAWARE
ANNUAL REPORT FOR
LIMITED LIABILITY PARTNERSHIP

The limited liability partnership organized and existing under the Revised Uniform Partnership Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability partnership is_____
_____.

2. The number of partners in the limited liability partnership is_____.

3. The Registered Office of the limited liability partnership in the State of Delaware is located at _____(street) in the City of _____, Zip code _____. The name of the Registered Agent at such address upon whom process against the limited liability partnership may be served is _____
_____.

By:_____
Partner/Authorized Person

Name:_____
Print or Type