

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

**Certificate of Registered Series  
of a Limited Partnership**

Dear Sir or Madam:

Enclosed please find a form for a Certificate of Registered Series of a Limited Partnership to be filed in accordance with Section 17-221(d)(1) of the Limited Partnership Act of the State of Delaware. The fee to file the Certificate is \$200. 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 [www.corp.delaware.gov](http://www.corp.delaware.gov). Please make the check payable to “Delaware Secretary of State”.

Annual Taxes in the amount of \$75 for the registered series are due by June 1 of each year following the calendar year in which their Certificate of Registered Series becomes effective. Please contact the Franchise Tax Section with any questions regarding Annual Taxes.

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

encl.  
rev. 08/19

*Special Instructions – Certificate of Registered Series of a Limited Partnership*

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

- 1. The complete name of the parent limited partnership exactly as it appears in our records. Please visit our website to verify the name.*
- 2. The name of the registered series; which must begin with the complete name of the parent limited partnership. Please visit our website to verify the availability of the name.*
- 3. The complete name and mailing address for each general partner of the registered series.*

***Execution Block*** - *The document must be signed by all general partners associated with the registered series pursuant to Section 17-204 of Title 6, Chapter 17. The name of the person must be typed or written legibly underneath the signature.*

*This form contains 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.*

*Sincerely,*

*Delaware Division of Corporations*

**STATE OF DELAWARE  
CERTIFICATE OF REGISTERED SERIES  
OF LIMITED PARTNERSHIP**

The undersigned, desiring to form a registered series of a limited partnership pursuant to the Limited Partnership Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited partnership is \_\_\_\_\_  
\_\_\_\_\_.

2. The name of the registered series is \_\_\_\_\_  
\_\_\_\_\_.

3. The name and mailing address of each general partner of the registered series is as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_  
General Partner

Name: \_\_\_\_\_  
Print or Type