

**Delaware Division of Corporations
401 Federal Street – Suite 4
Dover, DE 19901
Phone: 302-739-3073
Fax: 302-739-3812**

**Application for Transfer of
a Corporate Name**

Dear Sir or Madam:

Enclosed please find an application for transfer of the reservation of a Corporate Name to be filed in accordance with the Corporate Law of the State Of Delaware.

The fee to file the application is \$75.00 to be accompanied with the application. Please make your check payable to the “Delaware Secretary of State”.

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 07/06

**STATE OF DELAWARE
CORPORATE NAME RESERVATION
APPLICATION FOR TRANSFER
PURSUANT TO TITLE 8, SECTION 102
OF THE DELAWARE CODE**

TO: THE SECRETARY OF STATE
OF THE STATE OF DELAWARE

PLEASE TRANSFER THE FOLLOWING CORPORATE NAME:

(list name to be transferred here)

THE NAME OF THE ORIGINAL APPLICANT OF THE NAME RESERVATION IS:

FOR THE EXCLUSIVE PERIOD OF 120 DAYS PURSUANT TO THE PROVISIONS OF
TITLE 8, SECTION 102 OF THE DELAWARE CODE, THE UNDERSIGNED BEING THE
PERSON INTENDING TO FORM A CORPORATION AND ADOPT THE ABOVE
TRANSFERRED NAME, HEREBY EXECUTES THIS APPLICATION THIS _____
DAY OF _____, _____ A.D.

NAME AND ADDRESS OF APPLICANT TO WHOM THE NAME IS BEING
TRANSFERRED TO: (if transferring the reservation for a company or firm, please list the firm or
company name and have an attention person added to the bottom after the address)

BY: _____
Signature of Applicant

Name: _____
Print or Type Name