

**State of North Carolina  
Department of the Secretary of State**

**APPLICATION FOR CERTIFICATE OF AUTHORITY**

Pursuant to §55-15-03 of the General Statutes of North Carolina, the undersigned corporation hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1. The name of the corporation is \_\_\_\_\_;  
and if the corporate name is unavailable for use in the State of North Carolina, the name the corporation wishes to use is:  
\_\_\_\_\_.

2. The state or country under whose laws the corporation was organized is: \_\_\_\_\_.

3. The date of incorporation was \_\_\_\_\_.

4. Its period of duration is: s perpetual **or** a date certain (mm/dd/yyyy) \_\_\_\_\_.

5. Principal office information: (*Select either a or b.*)

a.  The corporation has a principal office.

The street address and county of the principal office of the corporation is:

Number and Street \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ County \_\_\_\_\_

The mailing address, *if different from the street address*, of the principal office of the corporation is:

Number and Street \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ County \_\_\_\_\_

b.  The corporation does not have a principal office.

6. The street address and county of the registered office in the State of North Carolina is:

Number and Street \_\_\_\_\_

City: \_\_\_\_\_ State NC, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

7. The mailing address, *if different from the street address*, of the registered office in the State of North Carolina is:

Number and Street \_\_\_\_\_

City: \_\_\_\_\_ State NC, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

8. The name of the registered agent in the State of North Carolina is: \_\_\_\_\_

9. The names, titles, and usual business addresses of the current officers of the corporation are (attach if necessary):

Name

Title

Business Address

_____	_____	_____
_____	_____	_____
_____	_____	_____

10. Attached is a Certificate of Existence (or document of similar import) duly authenticated by the Secretary of State or other official having custody of corporate records in the state or country of incorporation. **The Certificate of Existence must be an original and less than six months old.**

11. If the corporation is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its board of directors, certified by its secretary, adopting the fictitious name is attached.

12. This application will be effective upon filing, unless a delayed date and/or time is specified: \_\_\_\_\_.

This is the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
NAME OF CORPORATION

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Type or Print Name and Title

NOTES:

1. Filing fee is \$250. This document must be filed with the Secretary of State.

**Instructions for Filing**

**APPLICATION FOR CERTIFICATE OF AUTHORITY**

*(Form B-09)*

- Item 1** Enter the complete name of the corporation exactly as it appears in the records of the appropriate official in the state or country of incorporation. If the name cannot be used in North Carolina, enter the name (including a corporate ending) that it wishes to use in North Carolina.
- Item 2** Enter the state or country of incorporation.
- Item 3** Enter the date of incorporation
- Item 4** Check the applicable box for the period of duration and insert date if date certain.
- Item 5** Select item “a” if the corporation has a principal office. Enter the complete street address of the principal office and the county in which it is located. If mail is not delivered to the street address of the principal office or if you prefer to receive mail at a P.O. Box or Drawer, enter the complete mailing address of the principal office.  
Select item “b” if the corporation does not have a principal office.
- Item 6** Enter the complete street address of the corporation’s registered office and the county in which it is located.
- Item 7** Enter the complete mailing address of the corporation’s registered agent, only if mail is not delivered to the street address above or if you prefer to receive mail at a P. O. Box or Drawer.
- Item 8** Enter the name of the registered agent. The registered agent must be a North Carolina resident, an existing domestic business corporation, nonprofit corporation or limited liability company, or a foreign business corporation, nonprofit corporation or limited liability company authorized to transact business or conduct affairs in North Carolina.
- Item 9** Enter the names, titles, and usual business address of the current officers of the corporation.
- Item 10** See Form
- Item 11** See Form
- Item 12** The document will be effective on the date and at the time of filing, unless a delayed date or an effective time (on the date of filing) is specified. If a delayed effective date is specified without a time, it will be effective at 11:59:59 p.m. A delayed effective date may be specified up to and including the 90<sup>th</sup> day after the day of filing.

**Date and Execution**

Enter the date the document was executed.

In the blanks provided enter:

- The name of the corporation as it appears in Item 1
- The signature of the representative of the corporation executing the document (may be the chairman of the board of directors or any officer of the corporation).
- The name and title of the above-signed representative.