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COMMISSIONER

MARC SPITZER
COMMISSIONER



BRIAN C. MCNEIL
EXECUTIVE SECRETARY

JOANNE C. MACDONNELL
DIRECTOR CORPORATIONS DIVISION

ARIZONA CORPORATION COMMISSION

FOREIGN PROFIT OR NONPROFIT CORPORATION FILING CHECKLIST

Corporation Name

- Check name for availability -(602)542-3230.
- Attach copy of Trade name Certificate, Assignment if applicable, or attach completed name attestation form.
- Attach resolution adopting fictitious name. Must be approved by the board of directors and signed by the secretary.

Certificate of Disclosure

- Check Box A or B. If B, attach required information.
- Check part C, Yes or No. If yes, attach required information.
- Affix signature(s) of duly authorized officer (*profit*), president and secretary or vice president and assistant secretary (*nonprofit*). Must be dated within 30 days of delivery to the Commission.

Application for Authority

- Indicate an original application for authority.
- Indicate exact corporation name.
- Indicate fictitious name adopted for use in Arizona, if the exact name is not available.
- Indicate the state, province or country in which the corporation is incorporated.
- Indicate the date of incorporation and the duration.
- Indicate the address of the principal office in the state, province or country of incorporation.
- Indicate the name and address of the statutory agent in Arizona. The statutory agent must provide both a physical and mailing address. If statutory agent has a P.O. Box, then they must also provide a physical description of their street address/location.
- Indicate the street address of the known place of business in Arizona. May be in care of the address of the statutory agent.
- Indicate the limitations of purpose if applicable.
- Indicate the name(s) and business address(es) of the current directors and officers.
- Indicate number of shares of stock corporation is authorized to issue. (*Profit*).
- Indicate the aggregate number of shares issued. (*Profit*).
- Briefly indicate the business the corporation plans to conduct.
- Indicate whether the corporation has or does not have members (*Nonprofit only*)

FOREIGN PROFIT OR NONPROFIT CORPORATION FILING CHECKLIST

Application for Authority (continued)

- Affix signature of statutory agent (*acknowledge acceptance*).

Fees

- Attach check for filing fee. \$175.00 Additional \$35.00 for expedited services. Made Payable to the Arizona Corporation Commission.
- Execute check.

Copies

- Attach a copy of the Articles of Incorporation, and any amendments to the Articles, duly authenticated (*certified within 60 days*) by the official having custody of the records in the state, province or country of incorporation.
- Attach a Certificate of Existence or Good Standing, authenticated within 60 days by the official having custody of the records in the state, province or country of incorporation.

Publication

- You must publish a copy of your Application for Authority in a newspaper of general circulation in the county of the known place of business in Arizona, for three (3) consecutive publications. **Do not** publish until documents have been approved.
- File Affidavit of Publication with the ACC.

1. The corporate name must contain a corporate ending which may be "corporation," "association," "company," "limited," "incorporated" or an abbreviation of any of these words. If you are the holder or assignee of a tradename or trademark, attach Declaration of Tradename Holder form. If your name is not available for use in Arizona, you must adopt a fictitious name and provide a resolution adopting the name, which must be executed by the corporation Secretary.

3. You must provide the total duration in years for which your corporation was formed to endure. If perpetual succession, so indicate in this section. Do not leave blank, or state not applicable.

5. The statutory agent must provide both a physical and mailing address. If statutory agent has a P.O. Box, then they must also provide a physical description of their street address/location.

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN ARIZONA

The name of the corporation is: _____ A(n) _____ Corporation (State, Province or Country)

_____ We are a foreign corporation applying for authority to transact business in the state of Arizona.

_____ We are a foreign corporation currently authorized to transact business in Arizona and must now file this Application for New Authority pursuant to A.R.S. § 10-1504 because we have changed the following in our domicile jurisdiction:

- checkbox Our actual corporate name (or the name under which we originally obtained authority in Arizona).
checkbox The period of our duration.
checkbox The state, province or country of our incorporation.

1. The exact name of the foreign corporation is: _____

If the exact name of the foreign corporation is not available for use in this state, then the fictitious name adopted for use by the corporation in Arizona is:

_____ (FN).

2. The name of the state, province or country in which the foreign corporation is incorporated is: _____

3. The foreign corporation was incorporated on the ___ day of _____, and the period of its duration is: _____.

4. The street address of the principal office of the foreign corporation in the state, province or country of its incorporation is:

5. The name and street address of the statutory agent for the foreign corporation in Arizona is:

DO NOT PUBLISH THIS SECTION

5.a. The street address of the known place of business of the foreign corporation in Arizona IF DIFFERENT from the street address of the statutory agent is:

5.b. Indicate to which address the Annual Report should be mailed.

5.b. The Annual Report and general correspondence should be mailed to the address specified above in section 4 _____ or 5a _____.

6. If the purpose of your corporation has any limitations with regard to this section, so indicate. If not, state no limitations or leave blank.

6. The purpose of the corporation is to engage in any and all lawful business in which corporations may engage in the state, province or country under whose law the foreign corporation is incorporated, with the following limitations if any:

7. The names and usual business addresses of the current directors and officers of the foreign corporation are: (Attach additional sheets if necessary.)

Name:
Address:
City, State, Zip:

_____, _____ [title]

Name:
Address:
City, State, Zip:

_____, _____ [title]

Name:
Address:
City, State, Zip:

_____, _____ [title]

8. The total number of authorized shares cannot be "zero" or "N/A". Include authorized, not issued shares in this section.

8. The foreign corporation is authorized to issue _____ shares, itemized as follows: (Attach additional sheets if necessary.)

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

DO NOT PUBLISH THIS SECTION

9. The total number of issued shares cannot be "N/A".

The Application must be accompanied by the following: A Certificate of Disclosure, executed within 30 days of delivery to the Commission, by a duly authorized officer

Attach a certified copy of your articles of incorporation, all amendments and mergers (AZ Const. Art. XIV, §8) and a certificate of existence or document of similar import duly authenticated (within 60 days) by the official having custody of corporate records in the state, province or country under whose laws the corporation is incorporated.

The agent must consent to the appointment by executing the consent.

9. The foreign corporation has issued _____ shares, itemized as follows:

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

_____ shares of _____ [class or series] stock at _____ no par value or par value of \$ _____ per share.

10. The character of business the foreign corporation initially intends to conduct in Arizona is:

DATED this _____ day of _____, _____.

[Name of Corporation]

Executed by _____

Duly Authorized Officer or Director

[print name] [title]

PHONE _____ FAX _____
[optional] [optional]

ACCEPTANCE OF APPOINTMENT BY STATUTORY AGENT

The undersigned hereby acknowledges and accepts the appointment as statutory agent of this corporation effective this _____ day of _____, _____.

Signature

[Print Name]