



**New Mexico Secretary of State**  
Business Services Division  
325 Don Gaspar, Suite 300  
Santa Fe, New Mexico 87501  
(800) 477-3632 • www.sos.state.nm.us

## Foreign Limited Partnership Revised Application (Amendment) Form

**Filing Fee: \$100**  
**Statute: 54-2A-906, NMSA 1978**

Pursuant to the provisions of the Revised Limited Partnership Act, the undersigned Limited Partnership adopts the following Revised Application:

1. Name of the partnership: \_\_\_\_\_

2. Date of initial filing in New Mexico: \_\_\_\_\_

3. New Mexico ID number: \_\_\_\_\_

4. State/jurisdiction under whose laws the partnership is organized: \_\_\_\_\_

5. ID number issued to the partnership by the domestic state/jurisdiction: \_\_\_\_\_

6. Street address of the principal office: \_\_\_\_\_  
*(Cannot be a P.O. Box. Please include the city, state, and zip code.)*

7. Mailing address of the principle office: \_\_\_\_\_

8. If required to maintain an office in the domestic state/jurisdiction, the street address:  
\_\_\_\_\_

9. Registered agent in **New Mexico** information:

(a) Name: \_\_\_\_\_

(b) Street Address: \_\_\_\_\_  
*(Please include the city, state, and zip code.)*

(c) Mailing Address: \_\_\_\_\_  
*(Can be the same as the street address.)*

10. Partner information:

1. (a) Name: \_\_\_\_\_

(b) Street Address: \_\_\_\_\_  
*(Please include the city, state, and zip code.)*

(c) Mailing Address: \_\_\_\_\_  
*(Can be the same as the street address.)*

2. (a) Name: \_\_\_\_\_

(b) Street Address: \_\_\_\_\_  
(Please include the city, state, and zip code.)

(c) Mailing Address: \_\_\_\_\_  
(Can be the same as the street address.)

11. Is this partnership a foreign limited liability limited partnership? Yes:  No:

12. Amended Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Partner Signatures:

Printed Name:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_