



State of Tennessee
312 Rosa L. Parks Avenue, 6th Floor
Nashville, Tennessee 37243

**REQUEST FOR COPY
OF DOCUMENTS**

For Office Use Only

Please provide a certified copy of the following documents for the below listed corporation/limited liability company/limited partnership/limited liability partnership/general partnership:

1. Exact name of the business: _____

Secretary of State control number, if known: _____

2. Please indicate the documents desired.

All documents
Charter/Articles of Organization/Certificate and amendments
Certificate of fact regarding name change
Certificate of fact regarding merger

All annual reports (last 10 years)
Latest annual report

Specific documents: _____

3. If more than one set of document copies is requested, please indicate the number: _____

4. The name and mailing address of the party to receive this order:

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Note: If the service of an "overnight" courier is to be utilized, a completed airbill (including the account number to which the charges for services should be made) must accompany this request.

5. This request must be accompanied by the statutory processing fee of \$20.00 per set of copies per business. No credit will be extended. Make checks payable to: Tennessee Secretary of State. We regret that no requests can be taken by telephone, e-mail, or fax.