

REGISTRAR OF CORPORATIONS
 Department of Commerce
 COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
 P.O. Box 5795 CHRB, 12054 Pohnpei Way Capitol Hill Saipan, MP 96950
 Tel: (670) 664-8024
 Web: www.commerce.gov.mp
 email: registrar.reyes@commerce.gov.mp

ANNUAL LIMITED LIABILITY COMPANY (“LLC”) REPORT

Filing Fee: \$75.00

Make Check Payable to: CNMI TREASURY

File Original and Two Copies

**FILING: THE INITIAL REPORT MUST BE FILED WITHIN 60 DAYS OF INCORPORATION.
 ANNUAL REPORT MUST BE FILED ON OR BEFORE MARCH 1ST OF EACH YEAR.**

Check One: Domestic LLC

Foreign LLC

Check One: Initial Report 20_____

Annual Report for 20_____

Updated Report for 20_____

Name, Mailing and Physical Address of Designated Office of LLC

Name: _____

Telephone No.: _____ Email Address: _____

Mailing Address: _____

Physical Address: _____

State or Country of Organization of LLC: _____

Address of Principal Office (if different from Designated Office):

Name, Mailing and Physical Address of Agent for Service of Process

Name: _____

Telephone No.: _____ Email Address: _____

Mailing Address: _____

Physical Address: _____

MANAGERS (IF MANAGER-MANAGED): *(If not enough space, attach separate listing.)*

<u>NAME</u>	<u>NATIONALITY</u>	<u>ADDRESS</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

MEMBERS (IF MEMBER-MANAGED): *(If not enough space, attach separate listing.)*

<u>NAME</u>	<u>NATIONALITY</u>	<u>ADDRESS</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DATE: _____	Signature: _____ PRINT NAME & TITLE OF PERSON SIGNING (Must be Member of Member-Managed LLC or Manager of Manager-Managed LLC)
---------------------------	--