

**Form 301****(Revised 05/11)**

Submit in duplicate to:  
Secretary of State  
P.O. Box 13697  
Austin, TX 78711-3697  
512 463-5555  
FAX: 512/463-5709  
[Instructions](#)  
**Filing Fee: \$750**



This space reserved for office use.

**Application for  
Registration of a  
Foreign For-Profit  
Corporation**

1. The entity is a foreign for-profit corporation. The name of the entity is:

*Provide the full legal name of the entity as stated in the entity's formation document in its jurisdiction of formation.*

2A. The name of the corporation in its jurisdiction of formation does not contain the word "corporation," "company," "incorporated," or "limited" (or an abbreviation thereof). The name of the corporation with the word or abbreviation that it elects to add for use in Texas is:

2B. The corporation name is not available in Texas. The assumed name under which the corporation will qualify and transact business in Texas is:

*The assumed name must include an acceptable organizational identifier or an accepted abbreviation of one of these terms.*

3. Its federal employer identification number is: \_\_\_\_\_

Federal employer identification number information is not available at this time.

4. It is incorporated under the laws of: (set forth state or foreign country) \_\_\_\_\_

and the date of its formation in that jurisdiction is: \_\_\_\_\_

*mm/dd/yyyy*

5. As of the date of filing, the undersigned certifies that the foreign corporation currently exists as a valid corporation under the laws of the jurisdiction of its formation.

6. The purpose or purposes of the corporation that it proposes to pursue in the transaction of business in Texas are set forth below.

The corporation also certifies that it is authorized to pursue such stated purpose or purposes in the state or country under which it is incorporated.

7. The date on which the foreign entity intends to transact business in Texas, or the date on which the foreign entity first transacted business in Texas is: \_\_\_\_\_

*mm/dd/yyyy      Late fees may apply (see instructions).*

8. The principal office address of the corporation is:

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Address

City

State    Country    ZipCode

Complete item 9A or 9B, but not both. Complete item 9C.

9A. The initial registered agent is an organization (cannot be entity named above) by the name of:

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**OR**

9B. The initial registered agent is an individual resident of the state whose name is:

|                   |             |                  |               |
|-------------------|-------------|------------------|---------------|
| <i>First Name</i> | <i>M.I.</i> | <i>Last Name</i> | <i>Suffix</i> |
|-------------------|-------------|------------------|---------------|

9C. The business address of the registered agent and the registered office address is:

|                       |             |           |              |                 |
|-----------------------|-------------|-----------|--------------|-----------------|
| <i>Street Address</i> | <i>City</i> | <b>TX</b> | <i>State</i> | <i>Zip Code</i> |
|-----------------------|-------------|-----------|--------------|-----------------|

10. The corporation hereby appoints the Secretary of State of Texas as its agent for service of process under the circumstances set forth in section 5.251 of the Texas Business Organizations Code.

11. The name and address of each person on the board of directors is:

|                                  |             |                  |                |                 |
|----------------------------------|-------------|------------------|----------------|-----------------|
| Director 1                       |             |                  |                |                 |
|                                  |             |                  |                |                 |
| <i>First Name</i>                | <i>M.I.</i> | <i>Last Name</i> | <i>Suffix</i>  |                 |
|                                  |             |                  |                |                 |
| <i>Street or Mailing Address</i> | <i>City</i> | <i>State</i>     | <i>Country</i> | <i>Zip Code</i> |

|                                  |             |                  |                |                 |
|----------------------------------|-------------|------------------|----------------|-----------------|
| Director 2                       |             |                  |                |                 |
|                                  |             |                  |                |                 |
| <i>First Name</i>                | <i>M.I.</i> | <i>Last Name</i> | <i>Suffix</i>  |                 |
|                                  |             |                  |                |                 |
| <i>Street or Mailing Address</i> | <i>City</i> | <i>State</i>     | <i>Country</i> | <i>Zip Code</i> |

|                                  |             |                  |                |                 |
|----------------------------------|-------------|------------------|----------------|-----------------|
| Director 3                       |             |                  |                |                 |
|                                  |             |                  |                |                 |
| <i>First Name</i>                | <i>M.I.</i> | <i>Last Name</i> | <i>Suffix</i>  |                 |
|                                  |             |                  |                |                 |
| <i>Street or Mailing Address</i> | <i>City</i> | <i>State</i>     | <i>Country</i> | <i>Zip Code</i> |

### **Supplemental Provisions/Information**

Text Area: [The attached addendum, if any, is incorporated herein by reference.]

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**Effectiveness of Filing** (Select either A, B, or C.)

A.  This document becomes effective when the document is filed by the secretary of state.

B.  This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: \_\_\_\_\_

C.  This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90<sup>th</sup> day after the date of signing is: \_\_\_\_\_

The following event or fact will cause the document to take effect in the manner described below:

**Execution**

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

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

\_\_\_\_\_  
Signature of authorized person (see instructions)

\_\_\_\_\_  
Printed or typed name of authorized person.