

Form 505**(Revised 05/11)**

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX 512 463-5709

[Instructions](#)**Filing Fee: \$40**

This space reserved for office use.

**Application for Renewal
of Registration of An
Entity Name****Entity Information**

The organization named below is authorized to do business in Texas as a bank, trust company, savings association, or insurance company, or is a foreign filing entity not registered to do business in Texas, and submits this application to renew its registration of its name under section 5.155 of the Texas Business Organizations Code.

Organization Name

The date of filing of the registration being renewed is:

mm/dd/yyyy

The file number of the registration being renewed is:

Entity Address*Street or Mailing Address**City**State**Country**Zip Code***Jurisdiction and Formation**

The organization was formed on _____ under the laws of _____

*mm/dd/yyyy**State or Country***Nature of Business**

The nature of the organization's business is:

Certification of Existence

The undersigned authorized person certifies that the organization validly exists and is doing business under the laws of its jurisdiction of formation as a: (Check applicable box. If "other foreign organization", specify organization type in space provided.)

☐ Foreign For-profit Corporation☐ Foreign Limited Liability Company☐ Insurance Company☐ Foreign Nonprofit Corporation☐ Foreign Limited Partnership☐ Trust Company

- ☐ Foreign Professional Corporation ☐ Foreign Cooperative Association ☐ Savings Association
- ☐ Foreign Professional Association ☐ Bank
- ☐ Other Foreign Organization _____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: _____

Signature and title of authorized person