Form 3901 (Rev. 09/2017)

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

FAX: 512 463-5709

Filing Fee: No Fee



This space reserved for office use

Notification Statement For Out-of-State Business Entities Pursuant to Chapter 112, Business & Commerce Code

Entity Information

1. The name of the business enti	ty is:			
2. The entity was formed under	the laws of:			
3. The federal employer identified	cation number of the ent	ity is:		
	Principal Of	fice		
4. The address of the entity's prin	ncipal office is:			
Street Address	City	State	Country	Zip Code
	Date Entity Entered	l the State		
5. The entity first entered Texas on the following date:		mm/dd/yyyy		
	Contact Inforn			
6. Name of contact person:				
7. Mailing Address:				
Street Address or P.O. Box	City	State	Country	Zip Code