

STATE OF MARYLAND
CORPORATE NAME RESERVATION APPLICATION

Pursuant to Title 1, Section 505 of the Maryland Corporations and Associations Code

TO: THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION PLEASE RESERVE, IF AVAILABLE, THE FOLLOWING ENTITY NAME:

(List the name to be reserved with the appropriate ending here; e.g., Inc, LLC, LLP.)

FOR THE EXCLUSIVE PERIOD OF 30 DAYS PURSUANT TO THE PROVISIONS OF TITLE 1, SECTION 505 OF THE MARYLAND CODE, THE UNDERSIGNED BEING THE PERSON INTENDING TO FORM AN ENTITY AND ADOPT THE ABOVE RESERVED NAME, HEREBY EXECUTES THIS APPLICATION THIS _____ DAY OF _____ A.D.

NAME AND ADDRESS OF APPLICANT:

(If reserving for a company or firm, please list the firm or company name and have a contact person added in the address.)

BY: _____
Signature of Applicant

Name: _____
Print or Type Name

NOTE: A fee of \$25.00 must accompany this application.

() Check here for expedited service, an additional fee of \$20.00 is required.