This form is used by a general partnership to file an assumed or fictitious name under which business will be conducted in Clark County, Nevada. A general partnership is a type of business that is owned by two or more persons (natural and/or artificial). THIS FORM MUST BE COMPLETED BY EACH OWNER (PARTNER) AND SUBMITTED TOGETHER AT THE TIME OF FILING.

Assumed or Fictitious	Name:				
Owner Name:					Secretary of State for artificial perso
Full Name	for natural person, or exact	name of business entity as	registered w	vith the Nevada	Secretary of State for artificial perso
					ial Person (Business Entity)
Business Contact:					
Phon	ne Number	Email Address			
Mailing Address:					
Street	t Address				Unit/Apt/Suite/Bldg
City	State/Prov	ince	Zip		Country
☐ Select if ab	ove mailing address	is where the Notice	of Rene	ewal for this	s filing should be sent
Residence or Business	Street Address: (Re	equired if owner typ	•		s filing should be sent Natural Person and street
Residence or Business address is different fron	Street Address: (Re	equired if owner typ	•		
_	Street Address: (Re	equired if owner typovided above)	•		Natural Person and street
Residence or Business address is different from Street Address City	Street Address: (Ren mailing address pro	equired if owner typovided above)	e selecte	d above is l	Natural Person and street Unit/Apt/Suite/Bldg Country
Residence or Business address is different from	Street Address: (Ren mailing address pro	equired if owner typovided above)	e selecte	d above is l	Natural Person and street Unit/Apt/Suite/Bldg Country

NOTE: THIS FILING WILL BE REJECTED IF THE REGISTERED BUSINESS ENTITY AND, IF APPLICABLE, ITS PARENT COMPANY DOES NOT HAVE AN ACTIVE BUSINESS REGISTRATION WITH THE NEVADA SECRETARY OF STATE. IF THE AUTHORIZED SIGNER IS NOT SPECIFICALLY LISTED ON THE REGISTRATION, A NOTARIZED AUTHORIZED SIGNER AFFIDAVIT MUST ACCOMPANY THIS FORM.

BY SIGNING ABOVE, EACH SIGNER DECLARES UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF NEVADA THAT THE FOREGOING IS TRUE AND CORRECT. ON EVERY CHANGE IN THE PARTNERS, A NEW CERTIFICATE MUST BE FILED WITH THE COUNTY CLERK WITHIN ONE MONTH AFTER SUCH CHANGE. A FILED CERTIFICATE FOR AN ASSUMED OR FICTITIOUS NAME UNDER WHICH A BUSINESS IS BEING CONDUCTED IN CLARK COUNTY, NEVADA, IS VALID FOR FIVE (5) YEARS FROM THE FILING DATE.

Office use only – v7.1.25

Filing Type: □ New □ Renewal

IMPORTANT: BEFORE MAILING OR BRINGING THIS FORM IN PERSON, PLEASE READ THE FOLLOWING.

PLEASE BE AWARE THAT ACCORDING TO STATE LAW (NRS 239.330), ANY PERSON WHO KNOWINGLY PROCURES OR OFFERS ANY FALSE OR FORGED INSTRUMENT TO BE FILED, REGISTERED OR RECORDED IN ANY PUBLIC OFFICE, WHICH INSTRUMENT, IF GENUINE, MIGHT BE FILED, REGISTERED OR RECORDED IN A PUBLIC OFFICE UNDER ANY LAW OF THIS STATE OR OF THE UNITED STATES, IS GUILTY OF A CATEGORY C FELONY.

To avoid **delays** in processing or **rejection** of your FFN, you must:

> Complete the **CORRECT** form:

- o For a single natural person (or spouses who jointly own and conduct the business but are not forming a partnership), you must use our **Sole Proprietorship** form.
- For a domestic or foreign-qualified corporation, limited-liability company, limited partnership, limited-liability partnership, and limited-liability limited partnership, you must use our Registered Business Entity form.
- o For a partnership between two or more natural and/or artificial persons (excluding those listed that require the Registered Business Entity form), you must use our **General Partnership** form and complete a separate form for <u>every</u> owner in the partnership.
- o For a business trust or family trust, you must use our **Trust** form and complete a separate form for <u>every</u> trustee in the trust. A copy of the trust <u>must</u> also be provided listing all trustees for verification or the form will be rejected.
- o For a Series LLC created by a parent limited-liability company (or authorizing LLC), you must use our **Series LLC** form.

REVIEW the form:

- o Ensure all required information is provided and spelled correctly.
- o If you make a mistake, do not cross anything out or use correction fluid or tape you must complete a new form.

> **SIGN** the form:

- o Make sure to obtain all signatures required for the form used.
- For registered business entities, we must be able to verify authorized signers through business entity registration with the state of Nevada. If this is unclear, please call our office before attempting to file the form.
- > Submit the **ORIGINAL** form (copies are not accepted):
 - o By Mail: Clark County Clerk's Office

Attn: FFN Box 551604

Las Vegas, NV 89155-1604

o In person at one of our locations. Check the **Contact Us** page on our website https://weddings.vegas/ for current locations and hours.

➤ Include the correct **PAYMENT**:

- o \$25 to file a New or Renewal FFN form
- o \$20 to file a Termination form
- o No fee to file a Mailing Address and Contact Update form
- o Checks and money orders should be made payable to County Clerk