



Application for Business Trust

It is your responsibility to check for conflicts with federally registered trademarks. The filing of this name does not guarantee exclusive right to nor protection against unauthorized use of this name,(U.C.A. Sections 16-15-103-105) When approved, your Business Trust is registered for 3 years. The last words of the name must be "BUSINESS TRUST". If printed, must be legible.

1. Requested Business Name: _____
2. Duration: _____
3. Nature of Business: _____
4. Registered Office in Utah: _____

Street Address Only	City	State	Zip
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5. **Registered Agent:** Check this box if the name on line 5 is the agent only.

Print Name of Registered Agent (to whom all mailings will be sent).	Daytime Phone Number	Signature of Registered Agent
Street Address	City	Utah Zip

6. **Authorized Trustee(s) attach additional pages if needed:**

Under penalties of perjury and as an authorized partner, I declare that this application, and if applicable, the statement of change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

A.	Print Name	Signature
	Street Address	City State Zip
B.	Print Name	Signature
	Street Address	City State Zip
C.	Print Name	Signature
	Street Address	City State Zip

Return fees with two (2) copies of this application to the Division of Corporations. Means of payment are: cash, check, or money order made payable to the "State of Utah". Please include one (1) self addressed envelope with application. **If you are faxing you must include, on a cover sheet, the number of a VISA or MasterCard with the date of expiration.**

FREE! You may visit our Web Site to access this document and other information.

<p>Mail In: PO Box 146705 Salt Lake City, UT 84114-6705 Walk In: 160 East 300 South, Main Floor Information Center: (801) 530-4849 Toll Free: (877) 526-3994 (within Utah) Fax: (801) 530-6438 Web Site: http://www.commerce.utah.gov</p>
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