

**FOREIGN
NONPROFIT CORPORATION**

STATE OF MAINE

**AMENDED APPLICATION FOR
AUTHORITY TO CARRY ON ACTIVITIES**

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

(Name of Corporation)

Pursuant to [13-B MRSA §1207](#), the undersigned foreign corporation executes and delivers the following Amended Application for Authority to Carry on Activities:

FIRST: The jurisdiction of its incorporation is _____.

SECOND: The date on which it was authorized to carry on activities in the State of Maine is _____.

THIRD: The proposed amendment to its application of authority is _____
_____.

FOURTH: The corporate name of the corporation has been changed to (If no change, so indicate.) _____
_____ under the laws of its jurisdiction of
incorporation on _____.
(date)

FIFTH: If the real corporate name is not available, the **fictitious** name under which it proposes to apply for authority to carry on activities in the State of Maine is (If not applicable, so indicate.) _____
_____.

☐ Form [FICT-4](#) accompanies this application.

A **fictitious name** is a name adopted by a **foreign corporation** authorized to carry on activities in this State because its real name is unavailable pursuant to [13-B MRSA §301-A](#).

SIXTH: The activity (activities) which it seeks to pursue in the State of Maine is (are) authorized by the laws of its jurisdiction of incorporation and consist(s) of (If no change, so indicate.) _____

_____.

SEVENTH: The **new** address of its registered or principal office, wherever located, is (If no change, so indicate.)

(street, city, state and zip code)

EIGHTH: The address of the registered office of the corporation in the State of Maine is _____

(street, city, state and zip code)

DATED _____

***By** _____
(signature of any duly authorized individual)

(type or print name and capacity)

*This document **MUST** be signed by any duly authorized individual.

Please remit your payment made payable to the Maine Secretary of State.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**

Customer Contact Cover Letter

Name of entity(s) on the submitted filings:

Optional special handling request(s): (check only if applicable)

- ☐ Hold attested copy for pick up (will be required to pick up at our office in Augusta, Maine)
- ☐ 24-hour expedited filing (next business day) service: **\$50** additional filing fee per entity
- ☐ Immediate expedited filing (same business day): **\$100** additional filing fee per entity

NOTE: Only one expedite fee is required if filing multiple documents for the same entity/charter number at the same time.

Payment can be made by check or money order (payable to Maine Secretary of State) or by credit card. You may obtain a credit card voucher at <https://www.maine.gov/sos/cec/forms/credit.pdf>.

Total fee(s) enclosed: \$ _____

(Name of contact person)

(Daytime telephone number)

(Contact email address for this filing)

(Email address to use for annual report reminders)

Name and address of person **to return the attested copy** of the completed filing:

(Name of attested copy recipient)

(Firm or Company)

(Mailing Address)

(City, State & Zip)

NOTE: Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

Submit filings to:

Mailing Address if using US Postal Service

Department of the Secretary of State
Corporations, UCC and Commissions
101 State House Station
Augusta, ME 04333-0101

Mailing Address if using FedEx/UPS

Department of the Secretary of State
Corporations, UCC and Commissions
6 E. Chestnut Street, 5th Floor
Augusta, ME 04330