

**APPLICATION FOR CERTIFICATE
OF AUTHORITY
LIMITED COOPERATIVE ASSOCIATION
(FOREIGN)**

Submit in Duplicate

John A. Gale, Secretary of State
Room 1301 State Capitol, P.O. Box 94608
Lincoln, NE 68509
(402) 471-4079
http://www.sos.state.ne.us

An original certificate of good standing or existence from the state or country of organization executed by the official having custody of such records must be filed with this application.

NOTE: A certified copy of the company's articles of organization may not be filed in lieu of a certificate of good standing or existence.

Name of Limited Cooperative Association _____

Alternative Name _____
(only used when the associations name does not comply with Neb. Rev. Stat. 21-2908)

Organized under the laws of the State/Jurisdiction of _____

Address of Designated office in this state:

_____ NE _____
Street and Mailing Address City State Zip

Address of Designated office in state of organization IF such address is required by state of organization:

_____ _____
Street and Mailing Address City State Zip

Name and address of registered agent in Nebraska:

Registered Agent Name: _____

Address: _____ NE _____
Street and Mailing Address City State Zip

Signature of Officer or Authorized Representative

Printed name of Officer or Authorized Representative

FILING FEE: For Profit \$145.00 plus \$5.00 per page for any additional pages
Not for Profit \$25.00 plus \$5.00 per page for any additional pages

OFFICERS:

Name/Title

Street and Mailing Address

DIRECTORS:

Name

Street and Mailing Address

Please Copy this page and submit additional pages if needed.