

**LIMITED LIABILITY PARTNERSHIPS ACT 2016**

FOR OFFICE USE

**S19(1)-F LLP3****APPLICATION FOR RESERVATION  
OF LIMITED LIABILITY PARTNERSHIP NAME**  
(Section 19 (1))

*If there are more names to be reserved, please attach a separate sheet. List down the names in order of priority and state which names you wish to reserve.*

**Full Name of Applicant****Postal Address of Applicant**

**Category:**    **Domestic**    \*    ☐    **Foreign**    \*    ☐    **Global Business**    \*    ☐

**Proposed name of Limited Liability Partnership (preferred choice)**

(Office Use)

 **Proposed name of Limited Liability Partnership (first alternative)** **Proposed name of Limited Liability Partnership (second alternative)** **Signature:** .....**Date:** .....**Note:**

- (1) The name of every Limited Liability Partnership shall end with the words 'Limited Liability Partnership', the abbreviation 'L.L.P.' or the designation 'LLP'.
- (2) The name shall be available for registration of a Limited Liability Partnership with that name or registration of a change of name, as the case may be, for not more than 2 months from the date the applicant is informed.
- (3) In case the name contains any word requiring the Minister's consent, pursuant to section 18(4), such consent should be submitted with the application.

\* Tick where appropriate.

**Presented by:****Name:** .....**Address:**.....

.....

**Telephone No.**.....

(For office use)

**Other Fees:** .....    **Officers Name**.....

.....

**Sig:** .....**Date:** .....