

State of New Hampshire

APPLICATION FOR CERTIFICATE OF AUTHORITY OF A FOREIGN CONSUMER COOPERATIVE

NOTES FOR COMPLETING Form 40 CO-OP (RSA 293-A:15.03 & RSA 301-A:37)

Notes:

1. If the cooperative name is not available for use in New Hampshire, enter the name to be used in New Hampshire. In this case a trade name application must be filed with an additional \$50.00 fee and a copy of a board of directors' resolution to use the trade name in New Hampshire. The board of directors' resolution must be signed by the SECRETARY of the cooperative.
2. The registered office must be the agent's business address. If a post office box is given, the physical location of the business office **must also** be given. The registered agent shall be the agent of the cooperative upon whom any process, notice or demand required or permitted by law to be served upon the cooperative may be served.

293-A:15.07 Registered Office and Registered Agent of Foreign Corporations.

Each foreign corporation authorized to transact business in this state shall continuously maintain **in this state**:

- (1) a registered office that may be the same as any of its places of business; and
 - (2) a registered agent, who may be:
 - (i) an individual who resides in this state and whose business office is identical with the registered office;
 - (ii) a domestic corporation or not-for-profit domestic corporation whose business office is identical with the registered office; or
 - (iii) a foreign corporation or foreign not-for-profit corporation authorized to transact business in this state whose business office is identical with the registered office.
3. Exact name of cooperative making the application.
 4. Signature and title of person signing for the cooperative. Must be signed by chairman of the board of directors, president or another officer.
 5. An **ORIGINAL** certificate of legal existence or good standing must accompany this application. (Photocopies or fax copies will not be accepted.) The certificate must be duly authenticated within 60 days of the filing of this application by the proper officer of the state or country under the laws of which the cooperative is organized. (A certificate of good standing regarding taxes from a state department of revenue administration **is not** acceptable.)

Mail total fees, DATED & SIGNED ORIGINAL, ORIGINAL CERTIFICATE OF LEGAL EXISTENCE OR GOOD STANDING ISSUED BY THE STATE OR COUNTRY OF INCORPORATION (See Note 5) to: Corporate Division, Department of State, 107 North Main Street, Concord, NH 03301-4989.

State of New Hampshire

Filing fee: \$50.00

Use black print or type.

**Form must be single-sided, on 8½" x 11" paper;
double sided copies will not be accepted.**

Form 40 CO-OP

RSA 293-A:15.03

& RSA 301-A:37

APPLICATION FOR CERTIFICATE OF AUTHORITY OF A FOREIGN CONSUMER COOPERATIVE

PURSUANT TO THE PROVISIONS OF THE NEW HAMPSHIRE BUSINESS CORPORATION ACT, THE UNDERSIGNED COOPERATIVE HEREBY APPLIES FOR A CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN NEW HAMPSHIRE AND FOR THAT PURPOSE SUBMITS THE FOLLOWING STATEMENT:

FIRST: The name of the cooperative is _____
_____.

SECOND: The name which it elects to use in New Hampshire is _____
_____. (Note 1)

THIRD: It is incorporated under the laws of _____.

FOURTH: The date of its incorporation is _____ and
the period of its duration is _____.

FIFTH: The complete address (including zip code and post office box, if any) of its principal office is ____
_____.

SIXTH: The name of its registered agent **IN NEW HAMPSHIRE** is _____
_____ and the complete address (including zip code
and post office box, if any) of its registered office **IN NEW HAMPSHIRE** is (agent's business address)

_____. (Note 2)

SEVENTH: The principal purpose or purposes which it proposes to pursue in the transaction of business
in New Hampshire are _____

_____.

APPLICATION FOR CERTIFICATE OF AUTHORITY OF
A FOREIGN CONSUMER COOPERATIVE

Form 40 CO-OP
(Cont.)

EIGHTH: The names and usual business addresses of its current officers and directors are: (If there are additional officers or directors, attach additional sheet OR if the laws of the state of incorporation do not require directors, indicate below.)

| <u>Name</u> | <u>Title</u> | <u>Address</u> |
|-------------------------|--------------|----------------|
| <u>OFFICERS</u> | | |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| <u>DIRECTORS</u> | | |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

_____ (Note 3)
(Cooperative Name)

_____ (Note 4)
(Signature)

(Print or type name)

_____ (Note 4)
(Title)

Date signed: _____

DISCLAIMER: All documents filed with the Corporate Division become public records and will be available for public inspection in either tangible or electronic form.

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