

**STATE OF MARYLAND
CORPORATE NAME RESERVATION
APPLICATION PURSUANT TO
TITLE 1, SECTION 505 OF THE MARYLAND CORPORATIONS AND ASSOCIATIONS CODE**

NOTE: A FEE OF \$25.00 MUST ACCOMPANY THIS APPLICATION

() CHECK HERE FOR EXPEDITED SERVICE ***AN ADDITIONAL FEE OF \$20.00 REQUIRED***

TO: THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

PLEASE RESERVE, IF AVAILABLE, THE FOLLOWING ENTITY NAME:

(List name to be reserved with the appropriate tail here; e.g., Inc, LLC, LLP.)

FOR THE EXCLUSIVE PERIOD OF 30 DAYS PURSUANT TO THE PROVISIONS OF TITLE 1, SECTION 505 OF THE MARYLAND CODE, THE UNDERSIGNED BEING THE PERSON INTENDING TO FORM AN ENTITY AND ADOPT THE ABOVE RESERVED NAME, HEREBY EXECUTES THIS APPLICATION THIS _____ DAY OF _____, _____ A.D.

NAME AND ADDRESS OF APPLICANT: (If reserving for a company or firm, please list the firm or company name and have an attention person added in the address.)

BY: _____
Signature of Applicant

Name: _____
Print or Type Name

**Room 801-301 West Preston Street – Baltimore, Maryland 21201 Phone: (410) 767-1350
TTY Users call Maryland Relay 1-800-735-2258 Toll Free in MD: 1-888-246-5941
Website: <http://www.dat.maryland.gov>**