TRANSFER
OF
TRADE NAME REPORT

Filing Fee: $25.00

TO: OKLAHOMA SECRETARY OF STATE
421 N.W. 13th, Suite 210
Oklahoma City, Oklahoma 73103
(405) 522-2520

I hereby execute the following articles to transfer a trade name in Oklahoma from one business entity to another pursuant to the provisions of Title 18, Section 1140.2:

1. The name of the **trade name** which is to be transferred:

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2. The legal name of the business entity currently holding the trade name:

❖ As used in this section: **"Business Entity" means** a corporation, a business trust, a common law trust, a limited liability company, or any unincorporated business, including any form of partnership.

3. The legal name of the **"Recipient"** business entity to which the trade name is being transferred:

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4. Type of **"Recipient"** business entity to which the trade name is being transferred to: (check **one** of the following)

☐ corporation ☐ business trust ☐ common law trust
☐ limited liability company ☐ unincorporated business ☐ partnership

5. **State** or jurisdiction of formation of the **" Recipient"** business entity:

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6. **Address(es)** where business is being carried on under such transferred trade name:

COMPLETE <u>BOTH</u> ACKNOWLEDGMENT SECTIONS.

CURRENT BUSINESS ENTITY ACKNOWLEDGEMENT

- **Signed this _____ day of _____, _____ by:**

_____	_____
Signature	Signature
_____	_____
Printed Name	Printed Name
_____	_____
Title	Title

RECIPIENT BUSINESS ENTITY ACKNOWLEDGEMENT

- **Signed this _____ day of _____, _____ by:**

_____	_____
Signature	Signature
_____	_____
Printed Name	Printed Name
_____	_____
Title	Title

Oklahoma Secretary of State
Request to receive documents electronically

No need to wait on your filed documents to be mailed back to you. If you would like your filed documents returned electronically, please complete and attach this form to your documents. Complete ALL information below to receive an email which will contain a link to retrieve your filed documents. (Please print or type clearly.)

☐ **Return filed documents electronically**

Receipt will read as follows:

PERSONAL or BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP CODE: _____

PHONE OR CELL: _____

EMAIL ADDRESS: _____

(It is critical that the email address is correct, or you may not receive the notification of filing)