CONSENT TO USE OF NAME

TO: OKLAHOMA SECRETARY OF STATE
421 NW 13th St, Suite #210
Oklahoma City, OK 73103
(405) 522-2520

I hereby execute the following consent to the use of same name or indistinguishable name pursuant to the provisions of Title 18, Section 1141.1 or Section 2008.2b **or** Title 54, Section 500-108A, whichever is applicable:

1. Name of consenting business entity:

_____

2. State or jurisdiction of formation of consenting business entity: _____

3. Business entity is a: **(PLEASE CHECK ONE)**

☐ Corporation ☐ Limited Liability Company

☐ Limited Partnership ☐ Limited Liability Partnership

☐ Trade Name ☐ Other

4. Name of proposed business entity to which this consent is being given:

_____

5. State or jurisdiction of formation of business entity receiving consent: _____

6. In the event the consenting name is **identical** to the proposed name, the consenting entity is about to: **(PLEASE CHECK ONE)**

☐ Change its name ☐ Cease to do business

☐ Withdraw from Oklahoma ☐ Be wound up

The consent to use of name must be signed by the authorized person(s) of the consenting business entity.

Signed this _____ day of _____, _____ by:

_____ _____
Signature Signature

_____ _____
Printed Name Printed Name

_____ _____
Title Title

(SOS FORM 0033-08/26)

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)