

Instructions: Statement of Renewal of Registration of True Name

Use these instructions when completing a Statement of Renewal of Registration of True Name pursuant to [§ 7-90-604](#) of the Colorado Revised Statutes (C.R.S.). The required form/cover sheet must be used when submitting the document for filing. Information included in the document must be typewritten or machine printed and must be in English. Mistakes may have legal consequences; carefully review the information you provide. The Colorado Secretary of State's Office cannot provide legal advice. Questions should be addressed to your legal, business, or tax advisor(s). Only provide information that is required or permitted to be included in the form/cover sheet. Additional information may be provided in an attached document. Do not include personal identifying information, such as a social security number. All information entered in the form/cover sheet or included in an attachment will be made a matter of public record and will be immediately accessible on the Colorado Secretary of State's website. In order to obtain a copy of the filed document or access additional information, including Frequently Asked Questions (FAQs), visit our website, www.sos.state.co.us.

Instructions

ID Number: The ID Number field will be pre-filled with the 11-digit number assigned to the record by the Business Division of the Colorado Secretary of State's Office. This information cannot be changed.

True Name: The True Name field will be pre-filled with the true name exactly as such name is on record in the Business Division of the Colorado Secretary of State's Office. This information cannot be changed using this form/cover sheet.

Form of Entity: Select the form of the entity from the drop-down list. If "Other" is selected, enter the form of entity in the field provided.

Jurisdiction of Entity: Select the jurisdiction under the laws of which the entity is formed. If "Other" is selected, enter the jurisdiction in the field provided.

Principal Office Address: The principal office street and mailing address may be pre-filled. Any pre-filled information may be changed or deleted as necessary.

Principal Office Street Address: A street address is required. Provide the street name and number, including the suite, unit, or apartment number, if applicable. The city, state, and ZIP/postal code must also be provided. Any address outside of the United States must include the country and, if applicable, the province.

Example: 123 N. Main Street, Apt 101
Denver, Colorado 80202

Principal Office Mailing Address: A mailing address is optional. If the mailing address is different than the street address, or mail cannot be delivered to the street address, provide the address, including the city, state, and ZIP/postal code where mail is to be delivered. Any address outside of the United States must include the country and, if applicable, the province.

Example: P.O. Box 854
Lakewood, Colorado 80228

Mailing Address same as Street Address: If the mailing address is the same as the street address, or the mailing address is no longer valid, click the "Yes" button.

Additional Information: Click the "Yes" button if additional information as permitted or required by law is included in the document as an attachment. After clicking on "Submit" at the bottom of the online form/cover sheet, the Manage Attachments page will appear. This will allow additional information to be attached as a plain text (.txt) or PDF (.pdf) document. [Click here](#) for information regarding attachments.

Notice: This section describes the legal authority for filing this document. Refer to [§ 7-90-301.5](#), C.R.S., for more information.

Individual Causing Delivery: Pursuant to [§ 7-90-301.5](#), C.R.S., each individual causing the document to be filed is responsible for complying with the applicable statutes. Provide the last name, first name, and address of at least one individual causing the document to be delivered for filing. A middle name or initial and a suffix are optional. The mailing address, including the city, state, and ZIP/postal code, must be provided. Any address outside of the United States must include the country and, if applicable, the province.

Example: Smith, John

123 N. Main St., Apt 101
Denver, Colorado 80122

Additional Individuals Causing Delivery: If only one individual is causing this document to be filed, “No” is the correct option. Click the “Yes” button to include an attachment with the names and addresses of additional individuals causing the document to be filed. The attachment must provide the name of each additional individual, including their last name and first name. A middle name or initial and a suffix are optional. Also provide the mailing address, including the city, state and ZIP/postal code. Any address outside of the United States must include the country and, if applicable, the province.

Disclaimer: These instructions, and the related form/cover sheet, are not intended to provide legal, business, or tax advice, and are offered as a public service without representation or warranty. While the related form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains your responsibility. Questions should be addressed to your attorney.