

Restated Articles of Organization Checklist

(NMSA 1978 53-19-11)

The filing fee is \$50.00 Please make the check or money order payable to New Mexico Secretary of State or NMSOS.

All fields with a asterisk * are required.

Restated Articles of Organization shall supersede the original articles of organization and all prior amendments and restatements. If amending less than three articles it is suggested you submit Amended Articles of Organization.

Mail entire application along with the required information listed above to:

New Mexico Secretary of State

Business Services Division 325 Don Gaspar, Suite 300 Santa Fe, NM 87501



Type or Print Legibly \$50 Filing Fee

Limited Liability Company Restated Articles of Organization

The undersigned limited liability company under the New Mexico Limited Liability Company Act, adopts the following Restated Articles of Organization, which shall supersede the original Articles of Organization and any amendments thereto:

Article One: *The current **name**, **DBA name(s)**, and **business ID number** of the company:

If applicable, the name is b						
(must contain 'limited liability company', or 'limited company', or an abbreviation of such words)						
DBA name(s):						
(must contain 'limited liability co	ompany', or 'l	limited company', or a	abbreviation of such words)			
The Articles of Organizatio	on were init	tially filed on:				
The date of any previous a	amendmen	ts:				
Email Address:	Phone Number:					
Article Two: The purpose ny is organized.)	for which t	he company is orga	anized: (Please list a specific purpose for which the compa-			
Article Three: *The period	d of duratio	on is:				
Perpetual	OR	Specific Date	or Number of Years			
Article Four:						
(1) *The name of the regi	istered age	nt is:				
Individual First and Last Na	ame	<u>OR</u>	Registered Corporation or LLC Name and Business ID #			
(2) *The New Mexico stre	eet address	of the initial regist	ered agent is: (must be a valid physical address)			

325 DON GASPAR, SUITE 300 | SANTA FE, NEW MEXICO 87501 PHONE: (505) 827-3600 or (800) 477-3632 | FAX: (505) 827-8081 WWW.SOS.STATE.NM.US

Rev 5/2021 Page 1

(3) The New Mexico mailing address of the initial registered agent is: same as physical address							
(4) *The principa	al place of business of the company is: (m	nust be a physical add	ress)				
City	State		Zip code				
(5) The mailing a	address of the company is: same as	physical address					
City	State		Zip code				
Article Five: *The	e management of the business and affair	s of company is veste	d in a manager(s)				
	Yes	No					
If yes, the name	and address of each manager: (optional)						
Name	Address	City	State	Zip code			
Article Six: *The	limited liability company is a single mem	ber limited liability co	ompany:				
	Yes	No					
The name and ac	ddress of each member: (optional)						
Name	Address	City	State	Zip code			
*Executed Date:			Future Effective Date: (optional)				
	*Signature of Member or Manager	*Print	ed Name	-			

Statement of Acceptance of Appointment by Designated Successor Registered Agent

If the Registered Agent listed on Article Four is an individual, complete box one.

Box One - *Individual as Registered Agent

If the Registered Agent listed on Article Four is a corporation or LLC, complete box two.

Please Note: the limited liability company filing these articles cannot be listed as their own registered

(Registered Agent's Printed Name)
he undersigned individual, hereby accept the appointment as initial registered agent of
(Company's Name)
he Limited Liability Company which is named in the Restated Articles of Organization.
(Registered Agent's Signature)
Box Two - *Corporation or LLC as Registered Agent
on two - Corporation of LLC as negistered Agent
,(Authorized Person's Printed Name and Title)
(Authorized Person's Printed Name and Title)
(Authorized Person's Printed Name and Title)
(Authorized Person's Printed Name and Title) the undersigned individual on behalf of
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