The Business Names Registration Act CHANGE IN A LIMITED LIABILITY PARTNERSHIP



Please Print or Type

1.	Name of Limited Liability Partnership (before any changes)			
2	Name and address to which displicate should be returned (include mostel ands)	2	Contact manager if different from magistrant	
2.	Name and address to which duplicate should be returned (include postal code)	3.	Contact person, if different from registrant	
			T-1 (0.00 4.20)	
			Tel (8:00-4:30)	
4	A 1			
4.	A change occurred in the Limited Liability Partnership on the following date:			
5.	Please select and complete one (1) or more of the following:			
٥.	rease select and complete one (1) of more of the following.			
	The name of the firm has been changed to:			
	The designated Manitoba-resident partner has been changed to (name and residence address):			
	The Registered Office in Manitoba has been changed to:			
	The separate post office box number designated as the Manitoba address fo	r serv	ice by mail has been changed to:	
	Other (please attach schedule and specify)			
	other (prease attach schedule and specify)			

6. Where the name of the firm is being changed:						
The business name being registered is not that of another known firm, company, corporation or unincorporated association, or a						
name liable to be confounded or confused with the other name, or otherwise objectionable on public grounds.						
7. The signature of a partner is required.						
(Important: If the partner is a corporation, the signature of a corporate officer is required.)						
Date	Signature	Office Held (For Corporate Officer)				
Please print partner's name						
OFFICE USE ONLY						
Date of Filing						
Date of Filling						
Date of Expiry Remains						
Registration Number						
Registration Number	_					
Business Number						