

SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470

DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 30 TRINITY STREET, HARTFORD, CT 06106

PHONE: 860-509-6002 FAX: 860-509-6057 WEBSITE: www.concord-sots.ct.gov

INFORMATION REQUEST

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 81/2 X 11 SHEETS IF NECESSARY.

| FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS): MAKE CHECKS PAYABLE TO "SECRETARY | | | |
|--|---------------------|--------|---------------|
| | STOMER ID: | | OF THE STATE" |
| NAN | | | |
| ADDRESS: | | | |
| | | | |
| CIT | / : | | |
| STA | TE: ZIP: | | |
| EM/ | AIL: | | |
| 1. DEBTOR'S EXACT FULL LEGAL NAME IF INDIVIDUAL: | | | |
| | SURNAME | | |
| | FIRST PERSONAL NAME | MIDDLE | SUFFIX |
| OR | ORGANIZATION | 1 | |
| | ORGANIZATION NAME | | |
| 2. INFORMATION OPTIONS | | | |
| 2A REQUEST FOR INFORMATION (\$50 FEE) | | | |
| 2B ☐ SPECIFIC COPIES ONLY ☐ CERTIFIED (\$55.00 FEE) ☐ PLAIN (\$40.00 FEE) | | | |
| FILING NUMBER FILING NUMBER | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| REQUIRED INFORMATION FOR CREDIT CARD TRANSACTIONS, VISA, MASTERCARD OR AMEX. | | | |
| | | | |
| NAME ON CREDIT CARD: | | | |
| | | | |
| CREDIT CARD #: | | | |
| | | | |
| EXPIRATION DATE (MONTH/YEAR): | | | |
| SECURITY CODE: | | | |
| | | | |
| ZIP CODE (MUST MATCH THE CREDIT CARD BILLING ADDRESS): | | | |
| SIGNATURE: | | | |
| | | | |

FORM URI-1-1.1 Rev. 6/2014

CONNECTICUT INFORMATION REQUEST FORM

INSTRUCTIONS

Please type or print this form. Be sure it is completely legible. Read all Instructions. Follow Instructions completely.

Do not insert anything in the open space in the upper portion of this form; It is reserved for filling office use.

- 1. Debtor name: Enter only one Debtor name in item 1, an organization's name (1a) or an individual's name (1b). Enter Debtor's exact full legal name. Do not abbreviate.
 - 1a. Organization Debtor. "Organization" means an entity having a legal identity separate from its owner.
 - 1b. Individual Debtor. "Individual" means a natural person.

 For both organization and individual Debtors; Do not use Debtor's trade name, DBA, AKA, FKA, Division name etc. in place or combined with Debtor's legal name.
- 2. 2a. Check box in item 2a; if you are requesting a search of all active records, including lapsed filings.
 - 2b. Complete item 2b if you are ordering copies of specific records by record number.

OFFICE OF THE SECRETARY OF THE STATE

MAILING ADDRESS:

COMMERCIAL RECORDING DIVISION CONNECTICUT SECRETARY OF THE STATE P.O. BOX 150470 HARTFORD, CT 06115-0470

DELIVERY ADDRESS:

COMMERCIAL RECORDING DIVISION CONNECTICUT SECRETARY OF THE STATE 30 TRINITY STREET HARTFORD, CT 06106

PHONE:860-509-6002

WEBSITE: www.concord-sots.ct.gov

FORM URI-1-1.1 Rev. 6/2014