

COPY REQUEST

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REQUESTING PARTY INFORMATION

COMPANY NAME OF REQUESTING PARTY _____

CONTACT PERSON'S NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ EXT. _____

NM SCC # _____ or NAME OF CORPORATION OR LIMITED LIABILITY COMPANY (to be ordered)

_____ Articles – Incorporation / LLC Organization (NM)	Plain _____	Certified _____
_____ Articles –Authority/LLC Registration (foreign)	Plain _____	Certified _____
_____ Amendments/Mergers/restated articles/conversions/exchange	Plain _____	Certified _____
_____ Dissolutions/Withdrawals/Revocations	Plain _____	Certified _____
_____ Tax Clearance/Intent to Dissolve	Plain _____	Certified _____
_____ Bylaws/Amended Bylaws (Nonprofits only)	Plain _____	Certified _____
_____ Profit, NonProfit or Supplemental Reports	Plain _____	Certified _____
_____ Registered Agents (resignation or change of office/agent)	Plain _____	Certified _____
_____ Suspension, Resumption or Reinstatement	Plain _____	Certified _____

NOTE: PLEASE DO NOT USE THIS TO REQUEST GOOD STANDING
CONTACT (505) 827-4510

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- A fee of one dollar (\$1.00) per page, but in no case less than five dollars (\$5.00) for any nonprofit corporation.
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I have read and understood the above statement.

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