**INSTRUCTIONS-FORMATION OF A MARSHALL ISLANDS PARTNERSHIP**

A partnership is formed pursuant to the Marshall Islands Revised Partnership Act (the “Act”) when two (2) or more persons agree to carry on as co-owners a business for profit and file a Certificate of Partnership Existence pursuant to section 29 of the Act. A Certificate of Partnership Existence shall include the following information:

1. the name of the partnership, which must contain the word “Partnership”;
2. the name and address of the Registered Agent in the Marshall Islands and a statement that the partnership’s Registered Agent is to be its agent upon whom process against it may be served;
3. OPTIONAL: any other matter the partnership wishes to list, including, but not limited to, the names of the partners authorized to execute an instrument transferring real property held in the name of the partnership and the authority, or limitations on the authority, of some or all of the partners to enter into other transactions on behalf of the partnership.

***DOCUMENTS REQUIRED***

One original acknowledged Certificate of Partnership Existence must be executed by at least one (1) partner or by one (1) or more authorized persons and submitted with two (2) duplicate copies. Photocopies are acceptable as duplicate copies provided the signatures are legible. Each signature shall be over the individual’s printed name and title and may be a facsimile.

The original acknowledged Certificate of Partnership Existence along with the duplicates shall be forwarded to any office of Marshall Islands Maritime and Corporate Administrators, Inc. for processing. When processing is complete, a duplicate copy of the Certificate of Partnership Existence, as filed, is returned to the client.

**CERTIFICATE OF PARTNERSHIP EXISTENCE**

**PURSUANT TO SECTION 29 OF THE**

**MARSHALL ISLANDS REVISED PARTNERSHIP ACT**

The undersigned (*name and title of the person signing on behalf of the Partnership)* of *(name of Partnership)*, for the purpose of forming a Partnership hereby certify:

1. The name of the Partnership is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “Partnership”).
2. The registered address of the Partnership in the Marshall Islands is Trust Company Complex, Ajeltake Island, Ajeltake Road, Majuro, Marshall Islands MH96960. The name of the Partnership’s Registered Agent in the Marshall Islands upon whom process may be served at such address is The Trust Company of the Marshall Islands, Inc.
3. The Partnership shall file a Certificate of Dissolution upon the dissolution and completion of winding up of the Partnership.
4. **(*Insert any other matters the members determine to include in the Certificate, such as the names of the partners authorized to execute an instrument transferring real property held in the name of the partnership and the authority, or limitations on the authority, of some or all of the partners to enter into other transactions on behalf of the partnership.)***

IN WITNESS WHEREOF, the undersigned has/have executed this Certificate of Partnership Existence on this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PRINT NAME(S) AND TITLE OF

 PARTNER(S) OR OTHER

AUTHORIZED PERSON(S)

**OPTIONAL NOTARIAL STATEMENT:**

**SS.:**

On this day of \_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ known to me to be the individual described in and who executed the foregoing instrument and he/she duly acknowledged to me that the execution thereof was his/her act and deed.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*NOTE: This outline form is a service for the purpose of adaptation to the particular needs of individual situations and should under no circumstances be used by anyone without consulting legal counsel.*