

New Jersey Division of Revenue and Enterprise Services

Statement of Denial of Authority

Limited Liability Company

Title 42:2C-29

To file electronically:

1. Enter the information requested below and sign by typing your name in the signature field. The form can only be filled in using the free Adobe Acrobat Reader 9.1 or greater. *(See the pages following this form for field by field instructions, and notes on delivery and processing of work requests.)*
2. Click the "Add Attachments" button to add attachments if required *(Check the field by field instructions to see if you must include an attachment(s)).*
3. After the form has been filled in properly, please save a copy to your computer so that you can upload the form to the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application by following the instructions in the next step.
4. Click the "Open the Central Forms Repository Home Page to start the Form Submission Process" button at the bottom of the form. *(This action will launch the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application. If you have not created an account in the application, you will need to do so before using the online Web application. Once your account is created, please login to the application and follow the instructions for submitting your form and payment online.)*

Pursuant to the provisions of NJSA 42:2C, the Revised Uniform New Jersey Limited Liability Company Act, the undersigned hereby files this statement of denial of authority.

1. Name of Limited Liability Company: _____
2. Business ID Number: _____
3. Name of person denying authority: _____
4. Denial pertains to the authority to execute an instrument transferring real property held in the name of the company (check if applicable):
5. Denial pertains to the authority to the authority to enter into other transactions on behalf of, or otherwise act for or bind, the company (check if applicable):
6. Other information that pertains to the denial of authority:

The undersigned represents that this filing complies with State law as detailed in NJSA 42:2C.

Signature: _____ Date: _____

Name: _____ Title: _____

Instructions for Form L-118

STATEMENT OF DENIAL OF AUTHORITY
LIMITED LIABILITY COMPANY
NJSA 42:2C-29

STATUTORY FEE: **\$75**

The MANDATORY fields are:

Field #1 -- Name of Limited Liability Company:

List the name as it appears on the record of the State Treasurer.

Field #2 -- Business ID Number:

Provide the 10-digit business identification number issued by the State of New Jersey.

Field #3 -- Name of person who is denying authority

List the name of the person who is denying authority.

Field #4 -- Authority to execute an instrument transferring real property held in the name of the company:

To deny this authority, check box.

Field #5 -- Authority to enter into other transactions on behalf of, or otherwise act for or bind, the company:

To deny this authority, check box.

Field # 6 -- Provide any additional information pertaining to denial of Authority.

EXECUTION (Signature/Date)

An authorized representative must sign and date the form.
