



Please check box for (Optional) Expedited service  + \$25.00

FORM **57**

**NOTICE OF TRANSFER  
 OF RESERVED ENTITY NAME**

Sec. [178.0906\(2\)](#), [179.0115\(2\)](#), [180.0402\(2\)](#), [181.0402\(2\)](#), [183.0113\(2\)](#),  
 or [185.045](#), Wis. Stats.

I. The undersigned has reserved the following entity name with the Department:

Reserved name:
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II. The undersigned hereby transfers its reservation of the name identified above to the following:

Name of transferee:
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Street address of transferee:
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City:	State:	Zip/Postal code:
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Executed on: \_\_\_\_\_  
Name of transferor

\_\_\_\_\_  
Printed name of signer
Title of signer
Signature

**Contact Information:**

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Name

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Mailing Address

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City	State	Zip Code
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Email Address	Phone Number
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**INSTRUCTIONS** (Refer to section [178.0906\(2\)](#), [179.0115\(2\)](#), [180.0402\(2\)](#), [181.0402\(2\)](#), [183.0113\(2\)](#), or [185.045 Wis. Stats.](#), as applicable, for document content.)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a check for the \$10.00 filing fee, payable to the Department of Financial Institutions. (If sent by express or priority U.S. mail, please mail to State of WI-Dept. of Financial Institutions, Division of Corporate and Consumer Services, 4822 Madison Yards Way, 4th Fl., North Tower, Madison WI, 53705.) If requesting optional expedited service, please check the expedited service box in the upper-right corner of the first page and include an additional \$25.00. Filing fees are non-refundable. This document can be made available in alternate formats upon request to qualifying individuals with disabilities. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577 (hearing-impaired may call 711 for TTY) or by email at [DFICorporations@dfi.wisconsin.gov](mailto:DFICorporations@dfi.wisconsin.gov).

**Item 1.** This form must be completed by the entity that is transferring its reserved name to another entity. Provide the entity's full name, including any abbreviations.

**Item 2.** In this statement, the entity signing this form affirms its intention to transfer its name reservation to another party. Provide the full name of the transferee and the transferee's address.

**Execution.** Signature requirements for this document depend on the nature of the filer:

**If the document is being filed by a business corporation,** the document must be executed by an officer of the corporation, subject to two limited exceptions: (1) if directors have not been selected, it may be signed by an incorporator identified in the initial articles of incorporation; and (2) if the corporation is in the hands of a receiver, trustee or other court-appointed fiduciary, it may be signed by the fiduciary. Corporate directors are not authorized to sign this document in their capacities as directors. (A corporate director who also serves as an officer may sign the document, but that person must sign in their capacity as an officer of the corporation.)

**If the document is being filed by a limited partnership or a limited liability limited partnership,** the document must be executed by a general partner.

**If the document is being filed by any other type of entity,** it must be signed by a person authorized by the entity.

**FILING FEE.** The statutory filing fee for this document varies depending on the type of entity:

- For a **nonstock corporation**, the filing fee is **\$20**.
- For **all other entity types**, including limited liability companies, business corporations, limited partnership or limited liability limited partnership, general and limited liability partnerships, the filling fee is **\$10**.