

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

To,

The Registrar of Companies

[Office Address]  
[City, State, Zip Code]

Subject: Application for Registration of Limited Liability Partnership (LLP)

Dear Sir/Madam,

I, [Your Name], hereby wish to apply for the registration of a Limited Liability Partnership (LLP) under the LLP Act, [Year].

Details of the proposed LLP are as follows:

1. **\*\*Name of the LLP\*\***: [Proposed Name]
2. **\*\*Designated Partners\*\***:
  - [Partner 1 Name]
  - [Partner 2 Name]
  - [Additional Partner Names if any]
3. **\*\*Business Address\*\***: [Business Address]
4. **\*\*Nature of Business\*\***: [Brief Description of Business Activities]
5. **\*\*Capital Contribution\*\***: [Details of Capital Contribution by Each Partner]

Enclosed are the requisite documents, including the Digital Signature Certificates, Consent of Partners, and the LLP Agreement.

I kindly request you to process my application at your earliest convenience.

Thank you for your attention to this matter.

Yours sincerely,

[Your Name]  
[Your Designation, if applicable]  
[Your Company Name, if applicable]