

Fill in the form on your computer or legibly by hand.  
Sign the form and send in the original.

Skickas till | Send to  
**Bolagsverket**  
851 81 Sundsvall

**1. Org. nr | Registration no.**

**Företagsnamn | Business name**

**2. Kontaktperson | Contact person for this matter** Remember to fill in phone number for easy contact.

Kontaktpersonens förnamn och efternamn   First name and surname of the contact person		Företagsnamn   Business name	
Postadress   Postal address		Postnr   Postcode	Postort   Post town
E-postadress   E-mail address		Telefonnr.   Phone no. daytime	Deposit account no. (3 digits)

**3. Anmälan gäller | Application regarding**

<input type="checkbox"/> Handelsbolag till kommanditbolag   Trading partnership to limited partnership	<input type="checkbox"/> Kommanditbolag till handelsbolag   Limited partnership to trading partnership	<input type="checkbox"/> Bolagsmän   Partners Komplementärer   General partners Kommanditdelägare   Limited partners
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**4. Bolagsmän (delägare) | Partners (part-owners)** Fill in this sector when transforming to a trading partnership.

Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town

**5. Registreringsavgift | Registration fee** Pay the fee when you submit the application. State the registration number when paying.

Betalt belopp   Amount paid	Datum   Date of payment	Betalningsätt   Method of payment
		<input type="checkbox"/> Bank giro 5050-0255 <input type="checkbox"/> Plusgiro 95 06 08-0 <input type="checkbox"/> Cheque

**6. Firmateckning för handelsbolag | Signatory power for trading partnership** Must always be filled in when transforming to a trading partnership.

<input type="checkbox"/> 1) Firmateckningen kvarstår   Signatory power unchanged.	<input type="checkbox"/> 2) ) Firman tecknas av bolagsmännen var för sig   The partners, individually.
<input type="checkbox"/> 3) Firman tecknas av bolagsmännen gemensamt   The partners, jointly.	<input type="checkbox"/> 4) Firman tecknas av bolagsmännen två i förening   The partners, any two jointly.
<input type="checkbox"/> 5) Firman tecknas av bolagsmännen tre i förening   The partners, any three jointly.	<input type="checkbox"/> 6) Firman tecknas enligt nedan   Signatory power as stated below.

Fyll i eventuell annan firmateckning här | If applicable, fill in another alternative of the signatory power here. Please note that the information must be in Swedish.

**7. Komplementärer | General partners** Fill in this sector when transforming to a limited partnership.

Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town

**8. Kommanditdelägare | Limited partners** Fill in this sector when transforming to a limited partnership. Remember to state the amount invested.

Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	Insats kr   Amount invested SEK
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	Insats kr   Amount invested SEK
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	Insats kr   Amount invested SEK
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	Insats kr   Amount invested SEK
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town
Personnummer/organisationsnummer   Personal identity number/registration number	Folkbokförd i kommun   Registered in the municipality of	Insats kr   Amount invested SEK
Efternamn/registrerat företagsnamn   Surname/if legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Post town

**9. Firmateckning för kommanditbolag | Signatory power for limited partnership** Must always be filled in when transforming to limited partnership.

<input type="checkbox"/> 1) Firmateckningen kvarstår   Signatory power unchanged.	<input type="checkbox"/> 2) Firman tecknas av komplementären   The general partner, alone.
<input type="checkbox"/> 3) Firman tecknas av komplementärerna var för sig   The general partners, individually.	<input type="checkbox"/> 4) Firman tecknas av komplementärerna gemensamt   The general partners, jointly.
<input type="checkbox"/> 5) Firman tecknas av komplementärerna två i förening   The general partners, any two jointly.	<input type="checkbox"/> 6) Firman tecknas av komplementärerna tre i förening   The general partners, any three jointly.
<input type="checkbox"/> 7) Firman tecknas enligt nedan   Signatory power as stated below.	

Fyll i eventuell egen firmateckning här | If applicable, fill in another alternative of the signatory power here. Please note that the information must be in Swedish.

**10. Personer som har avgått från sina uppdrag | Persons who have resigned from their assignments**

Namn   Name	Uppdrag   Assignment, e.g. partner, general partner, limited partner

**11. Övrigt | Other matters**

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**12. Underskrift | Signature** The form must be signed by all the partners, both new and remaining partners. Important: Write in blue ink.

Datum   Date	Namnteckning   Signature	Namnförtydligande   Clarification of signature

## Information

Use this form when you want to transform a trading partnership to a limited partnership or vice versa. If you want to report other changes, please also use form no. 911 e or 912 e Application for changes. When the matter has been registered we shall send you a certificate of registration in Swedish. You will find more information and forms on [www.bolagsverket.se](http://www.bolagsverket.se).

### 1. Registration no. and business name

Fill in registration number and business name.

### 2. Contact person for this matter

Fill in personal and address details if you choose to have a contact person or if the enterprise has an agent. If the agent has a deposit account with Bolagsverket and wants to use it for payment of the registration fee, you must also fill in the three-digit account number.

### 3. Application regarding

Tick off the boxes for the changes you want to report to us.

### 4. Partners (part-owners)

If you want to transform the enterprise into a trading partnership, fill in personal and address details of the partners. A foundation or a non-profit association may be a partner if they solemnly declare that they have not been declared bankrupt. Write the declaration in field 11. Other matters.



#### Attachments, when applicable

- A certified copy of passport or other identification document for each person who is not registered in the Swedish population register.
- A certified copy of certificate of registration, not older than six months, if the person is a foreign legal entity.

#### Under the age of 18

Individuals from the age of 16, but under 18, may be partners if the legal guardians and the Chief Guardian of the municipality give their permission. The permission of the guardians and the Chief Guardian must be included in the application form or enclosed as an attachment.

### 5. Registration fee

Fill in when and how you have paid the fee. To enable us to match the registration fee with your application you must state the registration number when paying. The fee cannot be refunded once we have started the examination of your application.

### 6. Signatory power for trading partnerships

State the signatory power that applies for the trading partnership.

### 7–8. General partners and limited partners

If you want to transform the enterprise into a limited partnership fill in personal and address details of the general partners and the limited partners. Fill in the amount invested by the limited partners. The amount must be in Swedish kronor or euro. A limited partnership must have at least one general partner and at least one general partner. Both natural persons and legal entities may be general partners and limited partners. Foundations or non-profit associations cannot be general partners, even though they may be legal entities. However, a foundation or a non-profit association may be a limited partner if they solemnly declare that they are not bankrupt. Write the declaration in field 11. Other matters.

For information regarding necessary attachments to the application, see under 4. Partners (part-owners). There you will also find information which applies to persons under the age of 18.

### 9. Signatory power for limited partnerships

State the signatory power that applies for the limited partnership.

### 10. Persons who have resigned from their assignments

Fill in name and position for the persons who have resigned.

### 11. Other matters

Fill in further details here, if applicable.

### 12. Signature

All new and remaining partners must sign this form (part-owners, general partners, limited partners). If you represent a legal entity, write the registration number after the clarification of the signature. The person signing the form thereby insures that the persons to be registered are not in bankruptcy, have not been prohibited from carrying on business or do not have a custodian pursuant to the Parental Code.