



THE UNITED STATES VIRGIN ISLANDS
**OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS**

5049 Kongens Gade
Charlotte Amalie, Virgin Islands 00802
Phone - 340.776.8515
Fax - 340.776.4612

1105 King Street
Christiansted, Virgin Islands 00820
Phone - 340.773.6449
Fax - 340.773.0330

**APPLICATION FOR REGISTRATION OF A TRADE NAME
UNDER A CORPORATION – TNC12**

- A corporation cannot deceptively or falsely suggest that the organization, so denoted, is of a charitable or non-profit nature when the organization is, in fact, of a profit making nature.
- A trade name is not considered registered unless and until you are in receipt of the certified Certificate of Trade Name is issued by this office. You are cautioned against relying on an unofficial representation. The Office of the Lieutenant Governor nor the Division of Corporations and Trademarks shall not be held responsible for any costs incurred as a result of a client moving forward without proper registration.
- The Director reserves the right to reject any application for registration.
- This form is for use by corporations only.
- This form cannot be used for sole proprietorships, partnerships, limited liability companies, limited partnerships, limited liability partnerships, limited liability limited partnerships.
- This form must be completed in its entirety. Failure to do so will result in the rejection of the application document.
- One (1) original application, with original signature(s) and original notary authentication must be submitted.
- The application must be submitted free of obliterated text (no strike through marks, no corrective fluid/tape). Evidence of obliteration will result in the rejection of the application document.
- A trade name registered in accordance with the provisions of V.I.C. title 11, Chapter 21, shall not be the same as nor so similar as to cause confusion with the trade name of any person, partnership, association or corporation, foreign or domestic, doing business under such trade name in the United States Virgin Islands. This office will make that determination.
- A fee of \$25 must accompany the application. If the application is mailed, be certain to include a check or money order payable to the **GOVERNMENT OF THE VIRGIN ISLANDS**. The envelope must be addressed to **THE OFFICE OF THE LIEUTENANT GOVERNOR – DIVISION OF CORPORATIONS AND TRADEMARKS; 5049 KONGENS GADE; ST. THOMAS, VIRGIN ISLANDS 00802.**
- A fee of \$250.00 guarantees 24-hour processing of this application document.
- All trade name registrations must be renewed bi-annually (every two (2) years), on the anniversary of original registration, at a fee of \$50.00. Failure to do so will result in the cancellation of the registration.



THE UNITED STATES VIRGIN ISLANDS
OFFICE OF THE LIEUTENANT GOVERNOR
DIVISION OF CORPORATIONS AND TRADEMARKS

**APPLICATION FOR REGISTRATION OF TRADE NAME
UNDER A CORPORATION**

VIRGIN ISLANDS CODE – TITLE 11 – CHAPTER 21

LAST NAME OF THE PRESIDENT/VICE PRESIDENT

FIRST NAME OF THE PRESIDENT/VICE PRESIDENT

MAILING ADDRESS

EMAIL ADDRESS

BEST DAYTIME CONTACT NUMBER(S)/CELL PHONE

TERRITORY or STATE OF _____)

JUDICIAL DISTRICT or COUNTY OF _____)

FOR OFFICIAL USE ONLY

DATE RECEIVED

RECEIVED BY

PAYMENT AMOUNT RECEIVED

PAYMENT TYPE

RECEIPT NO.

THIS IS TO CERTIFY THAT _____
a corporation, the principal office of which is located at _____,
is doing, or intends to do business, in the United States Virgin Islands, and that this business is known, or is to be known, by
the designation, name or style of _____
and that said business is located at _____.
The kind of business to be transacted under said name is _____.

IN WITNESS WHEREOF, THE SAID CORPORATION _____
has to these presents, affixed its corporate seal and caused the same to be subscribed and acknowledged by its
_____ and _____ at the city of _____
_____ in the state (district) of _____ on the
_____ day of _____, _____.

BY AFFIXING MY SIGNATURE, I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION,
AND ANY ACCOMPANYING DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE SUBJECT TO INVESTIGATION AND
THAT ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF REGISTRATION.

AFFIX
CORPORATE SEAL
HERE

Corporation

President or Vice President

Secretary or Assistant Secretary

ACKNOWLEDGEMENT

TERRITORY OF THE VIRGIN ISLANDS _____)
JUDICIAL DISTRICT OF _____)

On this, the _____ day of _____, _____, before me, the undersigned officer, _____ personally
appeared who acknowledged himself/herself to be the President or Vice President _____, a Corporation,
and that he/she as such is authorized to do so, executed the foregoing instrument for the purpose therein contained by signing his/her name of the
corporation by himself/herself as _____.

IN WITNESS WHEREOF, I hereto set my hand and official seal.

Notary Public

My Commission Expires