



Swedish Companies Registration Office

SE-851 81 Sundsvall, Sweden

+46 771-670 670

[bolagsverket.se](http://bolagsverket.se)

## Ändra företagsform |

## Change form of business

Handelsbolag och kommanditbolag |

Trading partnership and limited partnership

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

**More information on page 4.**

Skicka till | Send to

Bolagsverket

SE-851 81 Sundsvall, Sweden

### 1. Organisationsnummer och företagsnamn | Registration number and company name

Organisationsnr   Registration number	Företagsnamn   Company name
---------------------------------------	-----------------------------

### 2. Kontaktuppgifter i ärendet | Contact information for this case

Fill in your email address and telephone number so we can contact you easily.

Kontaktpersonens för- och efternamn   First name and surname of the contact person	Företagsnamn   Business name		
Postadress   Postal address	Postnr   Postcode	Postort   Town/City	
E-postadress   Email address	Telefonnr   Phone no. daytime	Deposit account, if any, 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
--	--	---

### 4. Bolagsmän (delägare) | Partners (part-owners)

Fill in this section when changing business type into a trading partnership.

Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)		
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names		
Postadress   Postal address	Postnr   Postcode	Postort   Town/City	
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)		
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names		
Postadress   Postal address	Postnr   Postcode	Postort   Town/City	
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)		
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names		
Postadress   Postal address	Postnr   Postcode	Postort   Town/City	
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)		
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names		
Postadress   Postal address	Postnr   Postcode	Postort   Town/City	

## 5. Firmateckning för handelsbolag | Signatory power for trading partnership

Must always be filled in when changing business type into a trading partnership.

<input type="checkbox"/> 1) Firmateckningen kvarstår   Signatory power is unchanged.	<input type="checkbox"/> 2) Firman tecknas av bolagsmännen var för sig   The partners, individually, are entitled to sign on behalf of the partnership.
<input type="checkbox"/> 3) Firman tecknas av bolagsmännen gemensamt   The partners, together, are entitled to sign on behalf of the partnership.	<input type="checkbox"/> 4) Firman tecknas av bolagsmännen två i förening   The partners, any two together, are entitled to sign on behalf of the partnership.
<input type="checkbox"/> 5) Firman tecknas av bolagsmännen tre i förening   The partners, any three together, are entitled to sign on behalf of the partnership.	<input type="checkbox"/> 6) Firman tecknas enligt nedan   Signatory power is as stated below.

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

## 6. Komplementärer | General partners

Fill in this section when changing business type into a limited partnership.

Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land (om bosatt utomlands)   Country (if resident abroad)	
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

## 7. Kommanditdelägare | Limited partners

Fill in this section when changing business type into a limited partnership. Remember to state the amount invested.

Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land   Country (if resident abroad)	Insats kr   Amount invested in SEK
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land   Country (if resident abroad)	Insats kr   Amount invested in SEK
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land   Country (if resident abroad)	Insats kr   Amount invested in SEK
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City
Personnr/org.nr   Personal identity no./Registration no. (date of birth, if resident abroad)	Land   Country (if resident abroad)	Insats kr   Amount invested in SEK
Efternamn/registrerat företagsnamn   Surname/If legal entity, registered business name	Samtliga förnamn   All first names	
Postadress   Postal address	Postnr   Postcode	Postort   Town/City

## 8. Firmateckning för kommanditbolag | Signatory power for limited partnership

Must always be filled in when changing business type into limited partnership.

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

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

## 9. Personer som har avgått från sina uppdrag | Individuals who have resigned from their assignments

Namn   Name	Uppdrag   Assignment egpartner, general partner, limited partner

## 10. Övrigt | Other matters

--



## 11. Underskrift | Signature, please use blue ink

The form must be signed by all the partners, both new and remaining partners.

Datum   Date	
Namnsteckning   Sign name	Namnförtydligande   Print name

## Registreringsavgift | Registration fee

We will send a notification to the contact person for this case with information about the registration fee and how to pay it. We can start processing your application when we have received the payment.

## Information

Use this form when you want to change your business from a trading partnership into a limited partnership or vice versa. If you want to report other changes, you must also use form Application for changes, number 911 e or 912 e. You will find more information on [bolagsverket.se](http://bolagsverket.se). When the application has been registered we will send you a registration certificate in Swedish.

### 1. Registration no. and business name

Fill in company registration number and business name.

### 2. Contact person for this case

Fill in the contact information for this case. Please note that we usually send notifications by email.

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 the boxes for the changes you want to notify us of.

### 4. Partners (part-owners)

If you want to change your business into a trading partnership, fill in the personal and address details of the partners. For individuals who do not have a Swedish personal identity number you must fill in their birth date (YYYY-MM-DD). If the individual is not registered in the Swedish population register, you must fill in their country of residence. 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 box 10. Other matters.

#### Attachments, when applicable

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

#### Under the age of 18

Individuals older than 16, but younger than 18, may be partners if the legal guardians and the Chief Guardian of the municipality give their consent. The consent of the guardians and the Chief Guardian must be included in the application form or enclosed as an attachment.

### 5. Signatory power for trading partnerships

State the signatory power that applies for the trading partnership.

### 6–7. General partners and limited partners

If you want to change the business into a limited partnership, fill in the personal and address details of the general partners and the limited partners. For individuals who do not have a Swedish personal identity number you must fill in their birth date (YYYY-MM-DD). If the individual is not registered in the Swedish population register, you must fill in their country of residence. Fill in the amount invested by the limited partners. The amount must be in Swedish kronor or Euros.

A limited partnership must have at least one general partner and at least one limited partner. Individuals 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 box 10. 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 those under the age of 18.

### **8. Signatory power for limited partnerships**

State the signatory power that applies for the limited partnership.

### **9. Individuals who have resigned from their assignments**

Fill in the names and positions of the individuals who have resigned.

### **10. Other matters**

Fill in extra information here, if applicable.

### **11. Signature**

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

---

\* The copy must contain name, date of birth, validity dates, signature and photo. Copy the whole double-page spread in the passport containing the photo page. If the signature is on a separate page you must also attach a certified copy of that double-page spread. At least one other person must sign the copy to certify that it matches the original. Their signature, printed name and telephone number must be included on the copy.