

New Jersey Division of Revenue & Enterprise Services

CERTIFICATE OF CORRECTION

(For use by Domestic, Foreign, Profit and Nonprofit Corporations)

To file electronically:

1. Enter the information requested below and sign by typing your name in the signature field. The form can only be filled in using the free Adobe Acrobat Reader 9.1 or greater. *(See the pages following this form for field by field instructions, and notes on delivery and processing of work requests.)*
2. Click the "Add Attachments" button to add attachments if required *(Check the field by field instructions to see if you must include an attachment(s)).*
3. After the form has been filled in properly, please save a copy to your computer so that you can upload the form to the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application by following the instructions in the next step.
4. Click the "Open the Central Forms Repository Home Page to start the Form Submission Process" button at the bottom of the form. *(This action will launch the State of New Jersey Division of Revenue & Enterprise Services Central Forms Repository Web application. If you have not created an account in the application, you will need to do so before using the online Web application. Once your account is created, please login to the application and follow the instructions for submitting your form and payment online.)*

Check Appropriate Statute:

Title 14A:1-6 (5) New Jersey Business Corporation Act

Title 15A:1-7 (e) New Jersey Nonprofit Corporation Act

CERTIFICATE OF CORRECTION OF:

Corporation Name: _____

Corporation Number: _____

The undersigned hereby submits for filing a Certificate of Correction executed on behalf of the above named Corporation, pursuant to the provisions of the appropriate New Jersey statute.

1. The Certificate to be corrected is: _____

Date Filed: _____

2. The inaccuracy in the Certificate is (indicate inaccuracy or defect): _____ Article # _____

3. The Certificate hereby reads as follows:

Signature: _____

Date: _____

Name: _____

Title: _____

(Must be Chairperson of the Board, President or Vice President)

[Empty rectangular box for signature or stamp]

Instructions for Form C-152

**CERTIFICATE OF CORRECTION - PROFIT AND NON-PROFIT
(Titles 14A AND 15A)**

STATUTORY FEE: **\$10** for-profits; **\$50** for non-profits
The MANDATORY fields are:

Statutory Authority

Check the appropriate statutory authority – Title 14A:1-6(5) for profit corporations;
Title 15A:1-7(e) for non-profits

Business Name

List the name as it appears on the records of the State Treasurer.

Number

List the ten-digit business ID as it appears on the records of the State Treasurer.

Field # 1 -- Document (Certificate) To Be Corrected

Note the document to be corrected -- e.g., Certificate of Incorporation, Merger, etc.
and the date that it was filed with the State of New Jersey.

Field # 2 -- Defect Or Inaccuracy

List the article involved and describe the inaccuracy or defect.

Field # 3 -- Correction

Enter the language that corrects the defect or inaccuracy.

EXECUTION (DATE/SIGNATURE)

The chairman, president or vice-president must sign. Also, list the date of execution
(signature).
