



# Arkansas Secretary of State

## John Thurston

1401 W. Capitol, Suite 250, Little Rock, AR 72201

501-682-3409 • www.sos.arkansas.gov

### NOTICE OF CHANGE OF REGISTERED AGENT INFORMATION

(PLEASE TYPE OR PRINT CLEARLY IN INK)

**MARK ENTITY TYPE**

Corporation-Profit

General Partnership

Limited Liability Limited Partnership

Corporation-Nonprofit

Limited Partnership

Nonfiling/ Nonqualifying Entity

Limited Liability Company

Limited Liability Partnership

Other \_\_\_\_\_

Pursuant to the Laws of the State of Arkansas, the undersigned submits the following statement for the purpose of changing its registered agent in the State of Arkansas. If this statement reflects a change in registered agent for any entity or entities other than listed, this form must be accompanied by notice of such change to any and all applicable entities.

1. Name of corporation: \_\_\_\_\_

2. Is the entity:            Domestic            Foreign

3. Street address of registered agent for service of process changing from: \_\_\_\_\_  
Street Address

\_\_\_\_\_ Street Address Line 2 \_\_\_\_\_ City, State Zip

4. Street address for service of process, which registered agent is changing to: \_\_\_\_\_  
Street Address

\_\_\_\_\_ Street Address Line 2 \_\_\_\_\_ City, State Zip

5. Name of registered agent changing from: \_\_\_\_\_

To: \_\_\_\_\_

6. Filing date of Notice of Change of Registered Agent: \_\_\_\_\_

I understand that knowingly signing a false document with the intent to file with the Arkansas Secretary of State is a Class C misdemeanor and is punishable by a fine up to \$100.00 and /or imprisonment up to 30 days.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature and Title Authorized Officer

\_\_\_\_\_  
Authorized Officer