



Arkansas Secretary of State

500 Woodlane Avenue, Suite 256, 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

<input type="checkbox"/> Corporation-Profit	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Liability Limited Partnership
<input type="checkbox"/> Corporation-Nonprofit	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Series LLC/Protected Series
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> 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.

- Name of entity: _____
- Is the entity: Domestic Foreign
- Street address of registered agent for service of process changing from: _____
Street Address

Street Address Line 2 City, State Zip
- Street address for service of process, which registered agent is changing to: _____
Street Address

Street Address Line 2 City, State Zip
- Name of registered agent changing from: _____
To: _____
- 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

Note: For Series LLCs only- Per Arkansas law, all Protected Series associated with the Series LLC named in section #1 will also have a change in the Registered Agent information.