

**STATEMENT OF CHANGE
OF
REGISTERED AGENT/REGISTERED OFFICE**

Wyoming Secretary of State
The Capitol Building, Room 110
200 W. 24th Street
Cheyenne, WY 82002-0020

Phone (307) 777-7311/7312
Fax (307) 777-5339
E-mail: corporations@state.wy.us

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1. The name of the corporation is: _____
 2. The street address of its **current** registered office is: _____

 3. The street address of its **new** registered office is: _____

 4. The name of its **current** registered agent is: _____
 5. The name of its **new** registered agent is: _____
 6. That, after the change or changes are made, the street address of its registered office and the business office of its registered agent will be identical.

Date: _____ Signed: _____

Title: _____

(May be executed by Chairman of Board, President or another of its officers.)

*Filing Fee: For 1 - 5 Statement of Changes \$20.00 each
For more than 5 Statement of Changes \$10.00 each*

**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

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I, _____, voluntarily consent to serve as the
registered agent for _____

on the date shown below.

The registered agent certifies that he is: (check one)

- (a) *An individual who resides in this state and whose business office is identical with the registered office;*
- (b) *A domestic corporation or not-for-profit domestic corporation whose business office is identical with the registered office; or*
- (c) *A foreign corporation or not-for-profit foreign corporation authorized to transact business in this state whose business office is identical with the registered office.*

Dated this _____ day of _____, _____.

Signature of Registered Agent