



Office of the Secretary of State
Corporations & Charities Division

No Fee for Standard Service

With Expedited Service: \$50

For office use only

STATEMENT OF CHANGE BY COMMERCIAL REGISTERED AGENT ONLY

SEE INSTRUCTIONS BEFORE COMPLETING FORM - TYPE OR PRINT ALL INFORMATION IN DARK INK

1. Current Commercial Registered Agent Information

Current Commercial Registered Agent Name: _____ UBI#: _____

Current Physical Street Address in WA: _____

City: _____ State: _____ Zip: _____

Current EntityType (*LLC, Profit Corp., etc.*): _____ Current Jurisdiction of Formation (State or Country): _____

Current Mailing Address in WA: _____

City: _____ State: _____ Zip: _____

Current Email Address: _____

2. New Commercial Registered Agent Information

New Commercial Registered Agent Name (if applicable): _____ New UBI# (*if applicable*): _____

New Physical Street Address in WA (required if different than above): _____

City: _____ State: _____ Zip: _____

New EntityType (if applicable): _____ New Jurisdiction of Formation (*if applicable*): _____

New Mailing Address in WA (if applicable): _____

City: _____ State: _____ Zip: _____

New Email Address (if applicable): _____

I understand that I am responsible for promptly furnishing to each entity I represent a notice of this filing/record.

| | | | |
|-----------|------------|-------|------|
| Signature | Print Name | Title | Date |
|-----------|------------|-------|------|

This record is hereby executed under penalties of perjury, and is, to the best of my knowledge, true and correct.

RETURN COMPLETED FORM AND PAYMENT TO:

**801 Capitol Way S
PO Box 40234
Olympia, WA 98504-0234**

All fees are non-refundable.
All payments must be in US currency or
drawn on a US bank.
Make checks and Money Orders payable to:
Secretary of State