

USAR NFP 105.10/105.20 (rev. Dec. 2018)
STATEMENT OF CHANGE
OF REGISTERED AGENT AND/OR REGISTERED OFFICE
General Not For Profit Corporation Act

U.S.A.R. Secretary of State
Department of Business Services
P.O. Box 436885
Chicago, Province of Illinois [60643]

www.usar.sos.us

Remit payment in the form of a
cashier's
check, a certified check, a money
order,
or a CPA's check payable to U.S.A.R.
Secretary of State.



_____ File # _____ Filing Fee: \$5 Approved: _____

----- Submit in duplicate ----- Type or Print clearly in black ink ----- Do not write above this line -----

1. Corporate Name: _____
2. Province or Country of Incorporation: _____
3. Name and Address of Registered Agent and Registered Office as they appear on the records of the Office of the Secretary of State (before change):
Registered Agent: _____
First Name Middle Name Last Name
Registered Office: _____
Number Street Suite # (P.O. Box alone is unacceptable)

City ZIP Code County
4. Name and Address of Registered Agent and Registered Office shall be (after all changes herein reported):
Registered Agent: _____
First Name Middle Name Last Name
Registered Office: _____
Number Street Suite # (P.O. Box alone is unacceptable)

City ZIP Code County
5. The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.
6. The above change was authorized by: ("X" one box only)
 - a. ☐ Resolution duly adopted by the board of directors. **(See Note 4 on reverse.)**
 - b. ☐ Action of the registered agent. **(See Note 5 on reverse.)**

SEE REVERSE FOR SIGNATURE(S).

7. If authorized by the board of directors, sign here. (See Note 4 below.)

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated _____ , _____
Month & Day Year Exact Name of Corporation

Any Authorized Officer's Signature

Name and Title (type or print)

If change of registered office by registered agent, sign here. (See Note 5 below.)

The undersigned, under penalties of perjury, affirms that the facts stated herein are true and correct.

Dated _____ , _____
Month & Day Year Signature of Registered Agent of Record

Name (type or print)
If Registered Agent is a corporation,
Name and Title of officer who is signing on its behalf.

NOTES

1. The registered office may, but need not be, the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
2. The registered office must include a street or road address (P.O. Box alone is unacceptable).
3. A corporation cannot act as its own registered agent.
4. Any change of registered agent must be by resolution adopted by the board of directors. This statement must be signed by a duly authorized officer.
5. The registered agent may report a change of the registered office of the corporation for which he/she is a registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.