



PAUL D. PATE
Secretary of State
State of Iowa

**STATEMENT OF
RESIGNATION OF
REGISTERED AGENT**

Read the instructions on the reverse before completing.

All items must be completed before the statement of resignation will be considered.

Statement

Name of Business Entity: _____

Principal Office Address: _____

Registered Office Address: _____

TO THE ABOVE NAMED BUSINESS ENTITY. Please be advised that notice is hereby given to said business entity that _____, registered agent appearing on the records of the secretary of state for the business entity, does hereby resign as the registered agent effective at 12:01 AM on the thirty-first (31st) day after the filing date of this Statement or the designation of a new registered agent for the business entity, whichever is earlier. The registered office of the business entity is is not discontinued at the same time.

Signature of Registered Agent, or if Agent is an entity, signature of an individual representing the Agent entity:

Date: _____

Certificate of Mailing

I, _____, registered agent for _____, appearing on the records of the secretary of state, hereby certify that on _____ I did send a copy of this Statement of Resignation of Registered Agent by certified mail to the business entity _____ at the above principal place of business and _____ to the above registered office, if the office was not discontinued.

Signature of Registered Agent, or if Agent is an entity, signature of an individual representing the Agent entity:

Date: _____

INSTRUCTIONS

Read the instructions before completing.

All items must be completed before the application will be considered.

Please print or type the information required unless a signature is specified.

If you are uncertain about the accuracy of any of the required information contact the Secretary of State's Office at (515) 281-5204 for assistance.

Each item number below corresponds to the same number as they appear on the **Statement** or **Certificate of Mailing**.

Statement

1. Insert the complete legal name of the business entity.
2. Insert the address of the business entity's principal place of business
3. Insert the address of the registered office.
4. Insert name of registered agent reflected in the records of the Iowa Secretary of State.
5. Place an "X" in the appropriate box to indicate whether the registered office is also being discontinued.
6. Sign the statement.
7. Insert the date the statement was signed.

Certificate of Mailing

1. Insert name of registered agent reflected in the records of the Iowa Secretary of State.
2. Insert the complete legal name of the business entity.
3. Insert the date the statement was mailed to the business entity.
4. Place an "X" in the box to indicate that the statement was sent to the business entity's principal office.
5. Place an "X" in the box to indicate that the statement was sent to the registered offices if the registered office is not being discontinued.
6. Sign the certification.
7. Insert the date the certification was signed.

NOTES:

1. There is no filing fee.
2. The information you provide will be open to public inspection under *Iowa Code* chapter 22.11.

SECRETARY OF STATE
Business Services Division
Lucas Building, 1st Floor
Des Moines, IA 50319

Phone: (515) 281-5204

FAX: (515) 242-5953

Website: sos.iowa.gov