



(Limited Partnership - Iowa Code Chap 488)

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

<u>Statement</u>

| Name of Business Entity: | |
|----------------------------|---|
| Principal Office Address: | |
| Registered Office Address: | 3 |

TO THE SECRETARY OF STATE. Please be advised that notice is hereby given that _____

______, registered agent appearing on the records of the secretary of state for the business entity, does hereby resign as the registered agent effective *a*t 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.

⁵Signature of Registered Agent, or if the Agent is an entity, signature of an individual representing the Agent entity:

6 Date:

INSTRUCTIONS

Read the instructions before completing.

<u>All items must be completed</u> before the application will be considered.

<u>Please print or type</u> 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 **<u>Statement</u>**.

<u>Statement</u>

- 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 the name of the registered agent.
- 5. Sign the statement.
- 6. Insert the date the statement was signed.

NOTES:

- 1. The filing fee is \$5.00. Make checks payable to SECRETARY OF STATE.
- 2. The information you provide will be open to public inspection under *lowa 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