

STATE OF ALABAMA

NOTICE OF REGISTERED AGENT RESIGNATION

PURPOSE: To resign as the registered agent by delivering notice to the entity and the Secretary of State in accordance with 10A-1-5.34. Use a separate form for each separate Entity Identification (ID) number.

INSTRUCTIONS: Mail two copies (**required**) of this filing to the Secretary of State, Business Services Division, PO Box 5616, Montgomery, Alabama, 36103-5616. **No fee is involved. If the filer wants a copy returned for records, a third copy and a self-addressed prepaid/stamped envelope must be included in the submission or request copy via email to:**

_____. If the document must be rejected it will be rejected to the address shown in the "prepared by" box below if a return stamped envelope is not provided.

**This form must be typed.
Email deliveries will not be acknowledged, processed, or returned.**

- Alabama Entity ID Number (Format: 000-000): _____ - _____ **TO OBTAIN ID NUMBER** Go to our website at www.sos.alabama.gov click on Business Services (below picture), click on Business Entity and Name Search, click on Entity Name, enter the name of the entity in the appropriate box, and enter. Click on the number and verify that this is the correct entity. **This step is strongly recommended.**
- The name of the entity as registered with the Secretary of State of Alabama (**information must agree with item 1**):

- The address of the entity most recently known to the agent (required by 10A-1-5.34):

- The undersigned agent certifies that written notice of the resignation was given to the entity on _____/_____/_____ (MM/DD/YYYY). This date cannot be more than 11 days prior to the receipt for filing of this resignation document by the Alabama Secretary of State in accordance with 10A-1-5.34 or the document will be rejected.
- The termination of the appointment of this registered agent is effective on the 31st day after the date the Secretary of State receives and files the notice (stamped date in lower right section of document).

Typed Name of Registered Agent (Individual or Entity)

_____/_____/_____
Date (MM/DD/YYYY)

Authorized Signature of/for Registered Agent

Name **and** Title of Signature for Entity

(For SOS Use Only)