

NEBRASKA SECRETARY OF STATE  
Room 1301 State Capitol  
P.O. Box 94608  
Lincoln NE 68509

**STATEMENT OF NEBRASKA REGISTERED AGENT RESIGNATION**  
Limited Liability Company

File in Triplicate. \$15 Filing Fee

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1. Name and address of Entity:

\_\_\_\_\_  
\_\_\_\_\_

2. I am the resigning registered agent of the entity named above.

Name and address of agent:

\_\_\_\_\_  
\_\_\_\_\_

3. Notice is hereby given that I am resigning as the registered agent for service of process for the entity. I certify that the above statements are true and correct.

4. The Agency Appointment as Registered Agent for \_\_\_\_\_ shall take effect on the thirty-first day after the date of filing.

Signed this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(name of agent)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
**President**  
(office held)