



**Wyoming Secretary of State**  
 State Capitol Building, Room 110  
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 Cheyenne, WY 82002-0020  
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 Fax 307.777.5339  
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For Office Use Only

## Statement of Change by Registered Agent

1. This change affects every entity that I represent. (If not, please contact our office.)

2. Name of current registered agent and physical address of current registered office:

Current Registered Agent:

Current Registered Office:

3. New name of registered agent (if applicable) and physical address of new registered office (if applicable):

New Name of Registered Agent:

*For consistency the Secretary of State's Office will only keep one version of the agent's name on file.*

New Registered Office:

4. I hereby certify that I am in compliance with all requirements of W.S. 17-28-101 through W.S. 17-28-111.

5. After the changes are made, the physical address of my registered office and business office will be identical.

6. I hereby certify that every entity I represent has been notified of my name/office change.

**Signature:** \_\_\_\_\_  
*(shall be executed by the registered agent)*

**Date:** \_\_\_\_\_  
*(mm/dd/yyyy)*

Print Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Checklist

If you are a Commercial Registered Agent, changes noted on this form shall also be reflected on your Commercial Registered Agent form.

**Filing Fee: Nonprofit Corporation - \$3.00 (by statute); All other business entities - No Fee**

Please submit one **originally signed** document and one exact photocopy of the filing.

**Please review form prior to submitting to the Secretary of State to ensure all areas have been completed to avoid a delay in the processing of your documents.**