



Wyoming Secretary of State

Compliance Division
State Capitol Building
200 West 24th Street
Cheyenne, WY 82002-0020
Ph. 307.777.7370
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For Office Use Only

Registered Agent Complaint Form

Please complete and mail or email this form to the Wyoming Compliance Division with any relevant information attached. All information provided is confidential.

SECTION 1: Personal Information

Name:

Address:

Email Address:

Phone Number:

SECTION 2: Registered Agent Information

Name of Agent:

Agent's Address:

SECTION 3: Complaint Details

Summarize your complaint details (if more space is necessary, attach a separate sheet):

Name:

Date:

Signature _____