

**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**  
(Section 106.022, F.S.)

**OFFICE USE ONLY**

<input type="checkbox"/> Original Appointment	<input type="checkbox"/> Change of Appointment
<input type="checkbox"/> Change of Mailing Address	<input type="checkbox"/> Change of Physical Address

**Registered Agent and Office Information**

Name		Telephone
Street Address		
City	State	Zip Code
Mailing Address		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

**Signature of Registered Agent**

**Date**

**Former Registered Agent and Office Information (for changes only)**

Name		Telephone
Street Address		
City	State	Zip Code

**Committee or Organization Information**

Name of Committee or Organization		
Street Address		Telephone
City	State	Zip Code

**Signature of Chairperson**

**Printed Name of Chairperson**

**Date**