CHANGE OR DESIGNATION OF REGISTERED AGENT AND/OR REGISTERED OFFICE AND/OR PRINCIPAL OFFICE (FOREIGN LLC)

Filing Fee: $25.00

TO: OKLAHOMA SECRETARY OF STATE
421 NW 13th St, Suite #210
Oklahoma City, OK 73103
(405) 522-2520

I hereby execute the following articles for the purpose of changing the registered agent and/or registered office and/or principal office of a foreign limited liability company pursuant to the provisions of Title 18, Section 2046B:

1. Name of the limited liability company:

_____

2. **State** or other jurisdiction of its formation: _____

3. **NAME** and email address of the registered agent for service of process in the state of Oklahoma:

_____

❖ The registered agent **shall** be an individual resident of Oklahoma **or** a domestic or qualified foreign corporation, limited liability company, or limited partnership.

Email Address: _____

4. Street address of the registered office for service of process in the state of Oklahoma:

_____ Oklahoma _____

Street address **City** **State** **Zip Code**
(P.O. BOXES ARE NOT ACCEPTABLE)

5. Street address of the principal office, wherever located:

_____

Street address **City** **State** **Zip Code**
(P.O. BOXES ARE NOT ACCEPTABLE)

6. **E-MAIL** address of the primary contact for the registered business:

_____

❖ Notice of the Annual Certificate will **ONLY** be sent to the Limited Liability Company at this electronic mail address.

This statement must be signed by a manager, member or other person.

- Signature: _____ Dated: _____
- Printed Name: _____

(SOS FORM 0077-07/26)

Oklahoma Secretary of State
Request to receive documents electronically

No need to wait on your filed documents to be mailed back to you. If you would like your filed documents returned electronically, please complete and attach this form to your documents. Complete ALL information below to receive an email which will contain a link to retrieve your filed documents. (Please print or type clearly.)

☐ **Return filed documents electronically**

Receipt will read as follows:

PERSONAL or BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY, STATE & ZIP CODE: _____

PHONE OR CELL: _____

EMAIL ADDRESS: _____

(It is critical that the email address is correct, or you may not receive the notification of filing)