



# Secretary of the State of Connecticut

PHONE: 860-509-6003 WEBSITE: [www.business.ct.gov](http://www.business.ct.gov)

EMAIL: [crd@ct.gov](mailto:crd@ct.gov)

OFFICE USE ONLY  
(Label)

## CHANGE OF AGENT'S ADDRESS DOMESTIC OR FOREIGN - ALL ENTITIES

**IMPORTANT:** Do not use this form to appoint a NEW agent. To appoint a new agent, complete the Change of Agent Form (for Domestic or Foreign entities, as applicable) - USE INK. PRINT OR TYPE. ATTACH 8 1/2" X 11" SHEETS IF NECESSARY.

<b>FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS):</b> NAME: MAILING ADDRESS:  CITY: STATE: ZIP: EMAIL: TELEPHONE NUMBER:		<b>FILING FEE: \$50</b>  <b><u>Exceptions: \$20</u></b> for Limited Partnership and Nonstock (nonprofit) Corporations.  Make checks payable to "Secretary of the State"
<b>1. NAME OF BUSINESS ENTITY (REQUIRED - Name provided must exactly match the name of the entity as it appears on the records of the Secretary of the State and include the appropriate business designation, (e.g., LLC, Inc., Corporations, etc.):</b>		
<b>2. STATE / COUNTRY OF FORMATION IF OTHER THAN CONNECTICUT (REQUIRED):</b>		
<b>3. NAME AND ADDRESS OF CURRENT AGENT (REQUIRED - Name provided must exactly match the name on record with the Secretary of the State):</b>		
<b>BUSINESS ADDRESS (No P.O. Box)</b>	Check box if no business address: <input type="checkbox"/>	<b>CONNECTICUT RESIDENCE ADDRESS (No P.O. Box):</b>
STREET:		STREET:
CITY:		CITY:
STATE: ZIP:		STATE: CT ZIP:
<b>4. CONNECTICUT MAILING ADDRESS OF REGISTERED AGENT (REQUIRED for all LLCs and Domestic Stock Corporations only - P.O. Box IS acceptable):</b>		
STREET OR P.O. BOX:		
CITY: STATE: ZIP:		
<b>5. EXECUTION (REQUIRED - Subject to penalties of false statement):</b> <b>DATE (mm/dd/yyyy):</b> _____ / _____ / _____		
NAME OF SIGNATORY (print or type)	CAPACITY/TITLE OF SIGNATORY (print or type)	SIGNATURE (required)

## CHANGE OF AGENT'S ADDRESS FORM

Domestic or Foreign - All Entities

**IMPORTANT NOTE:** Do not use this form to appoint a NEW agent. To appoint a new agent, complete the Change of Agent Form (for Domestic or Foreign entities, as applicable) instead.

NUMBERS CORRESPOND TO THE SECTION NUMBERS ON THE FORM

### INSTRUCTIONS

- 1. NAME OF BUSINESS ENTITY:** Provide the name of the business entity as it appears on the records of the Secretary of the State.
- 2. STATE OR COUNTRY OF FORMATION:** Provide the business entity's state or country of formation.
- 3. NAME and ADDRESS OF CURRENT AGENT:** Provide the name of the business entity's CURRENT agent.  
--If the agent is a natural person, provide the complete street address of the agent's business and Connecticut residence address. If the agent has no business address, check the box to indicate he/she has no business address.)  
--If the agent is a business entity, provide the address of its principal office in the block designated for "Business Address."  
Any person signing on behalf of a business entity agent must include his or her title in the signature line (see section number 5).
- 4. CONNECTICUT MAILING ADDRESS OF REGISTERED AGENT:** All Limited Liability Companies and Domestic Stock Corporations must provide a mailing address. A P.O. Box is acceptable. Provide the mailing address here.
- 5. EXECUTION / SIGNATURE:** The document must be executed/signed by an authorized official of the business entity whose agent has changed his/her address. The authorized official must print or type his/her name, state the capacity/ title under which he/she signs and provide a signature. The execution constitutes a legal statement under the penalties of false statement that the information provided in the document is true.

### OFFICE OF THE SECRETARY OF THE STATE

#### MAILING ADDRESS:

BUSINESS SERVICES DIVISION  
CONNECTICUT SECRETARY OF THE STATE  
P.O. BOX 150470  
HARTFORD, CT 06115-0470

#### DELIVERY ADDRESS:

BUSINESS SERVICES DIVISION  
CONNECTICUT SECRETARY OF THE STATE  
165 CAPITOL AVENUE, SUITE 1000  
HARTFORD, CT 06106

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