



**Wyoming Secretary of State**

Compliance Division  
State Capitol Building  
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Cheyenne, WY 82002-0020  
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For Office Use Only

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## Commercial Registered Agent Registration

1. Legal name of applicant. (*An applicant may be a natural person or business entity. If a natural person, the individual must be 18 years or older.*):

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

2. The applicant's physical address (a post office box is prohibited) in **Wyoming** where service of process may be made during regular business hours for entities served by the applicant:

Address:

City, State and Zip Code:

Business Hours for Service of Process:

Phone Number:

Email Address:

- 2a. *New address. Please file attached form to apply new address to all of the business entities this registered agent represents.*

3. Mailing address of the applicant if different:

4. If the applicant is a business entity, the name, physical address and phone number of the natural person(s) who has responsibility for the entity:

Name:

Address:

City, State and Zip Code:

Phone Number:

5. By signing this application, I agree:

- To comply with the provisions of the W.S. §17-28-101 – 17-28-111.
- That the applicant, or in the case of a business entity, its officers, directors, partners, or persons serving in a similar capacity have not been convicted of a felony.
- That the name of natural person(s) or the position(s) that is authorized to accept service of process on behalf of the Commercial Registered Agent shall be held on site at the registered office.
- That this registration expires on December 31 of each year. A registered agent who does not renew by December 31 of each year shall not have registered agent status.
- That information contained on this application may be published on the Secretary of State's website:
  - Yes                      No

***I declare under the penalty of perjury that the statements contained in this application are true and correct and acknowledge that pursuant to W.S. §6-5-308 it is a felony to knowingly offer a false or forged instrument for filing with the Secretary of State.***

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

**Signature:** \_\_\_\_\_

Print Name:

Title:

State of \_\_\_\_\_

S.S.

County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

by \_\_\_\_\_.

*Signatory Name*

SEAL

\_\_\_\_\_  
*Notary Public Signature*

My Commission Expires: \_\_\_\_\_

Checklist

***Filing Fee: \$25.00*** Make check or money order payable to Wyoming Secretary of State.



**Wyoming Secretary of State**  
 State Capitol Building, Room 110  
 200 West 24<sup>th</sup> Street  
 Cheyenne, WY 82002-0020  
 Ph. 307.777.7311  
 Fax 307.777.5339  
 Email: [Business@wyo.gov](mailto:Business@wyo.gov)

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## 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.**